

ABSTRACT

FACTORS CONTRIBUTING TO LATINAS/OS' UTILIZATION OF MENTAL HEALTH SERVICES IN FRESNO COUNTY

Previous research has identified factors that have affected Latina/o's utilization of mental health services in the United States. However, this study will focus on the research question surrounding factors affecting the utilization of mental health services among Latinas/os in Fresno County. This study used a qualitative phenomenological approach to assess the lived experiences of participants. Seven Latina/o young adults who sought or received mental health services in Fresno County were included in this study. Participants answered questions regarding their perceptions of mental health services, the accessibility of and barriers to services, and any other factors that may have affected their mental health service usage. The five common themes found in this study were: (1) preferences in mental health providers, (2) negative factors that affected the utilization of services, (3) positive factors that impacted mental health service usage, (4) utilization of alternative coping methods, and (5) recommendations of participants for current mental health services in Fresno County. In the field of social work, understanding a person's experience is the first step in improving the quality of care that individuals receive. The five themes can assist in ameliorating the availability of community mental healthcare through modified social work professional interventions in a culturally grounded manner.

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FACTORS CONTRIBUTING TO LATINAS/OS' UTILIZATION OF
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CHAPTER 1: INTRODUCTION

Over 47 million people in the United States experience mental health issues in any given year (Substance Abuse and Mental Health Services Administration [SAMHSA], 2019). Sixteen percent of African Americans, 22% of American Indians and Alaskan Natives, 14% of Asian Americans, and 16% of Hispanics or Latinas/os have experienced one or more mental illnesses in the past year (Substance Abuse and Mental Health Services Administration [SAMHSA], 2019). The American Psychiatric Association (2017) reported that by the year 2060, Hispanics will be making up about 30% of the American population. If this population growth continues at this rapid pace, then so may mental illnesses among Hispanics and Latinas/os unless something is done to address the mental illnesses.

Problem Statement

If treatment for mental illnesses is not available, then individuals who live with clinically significant psychological symptoms may affect their daily functioning in various spheres of life such as school, occupation and home. If many individuals are not treated, there may be a possibility for a community to suffer from collateral effects. In other words, because individuals are not receiving treatment, the lack of treatment may indirectly affect other individuals in the community by witnessing the increased number of individuals who are incarcerated or abusing substances (Testa, 2015).

In California, Hispanics and Latinas/os make up about 40% of the population (United States Census Bureau, 2018). Of those Hispanics, about five percent have some sort of serious mental health illness while the California average is four percent (California Health Care Foundation, 2018). However, not much information is available regarding mental health among Latinas/os in the Central Valley. For instance, in Fresno County, Latinas/os make up over half of the population (United States Census Bureau,

2018). Assessing the factors that contribute to the utilization of mental health services by Latinas/os in the Central Valley is important because the number of Latinas/os in regards to mental disorders is tripling in numbers compared to other racial groups (Wiener, 2016). Based on data collected from Latinas/os of their experiences with mental health services in the Central Valley in this study, services may then be made more accessible to Latinas/os. The goal of this study is to increase awareness and improvement of mental health services to encourage usage among Latinas/os.

Underutilization of mental health services among Latinas/os can have an impact on them personally and in the community, similarly known as the micro and macro levels. For example, at the micro level, the underutilization of mental health services among Latinas/os can cause severe psychological distress if left untreated. When a person with a mental disorder is not treated, the symptoms can worsen and can start affecting their physical well-being (Robson & Gray, 2007). At the macro level, not only will this lack of treatment affect the individual, but this level additionally affects the community. For instance, if individuals leave their mental disorders untreated, they increase their chances of becoming incarcerated or getting involved with substance abuse (Testa, 2015). An increase in incarceration and substance abuse can ultimately affect the community as a whole because these situations would expose other people to the negative trauma. Children who are still developing may grow up in a neighborhood where drugs and incarceration is the norm and the cycle may continue.

Studying the factors that contribute to the utilization of mental health services among Latinas/os will help to understand the effects the factors have on micro and macro levels. Getting more details on the factors that contribute to the utilization of mental health services can help therapists and psychologists figure out ways to construct effective services for Latinas/os. Optimistically, this can help reduce the number of Latinas/os with mental illnesses or at least help them deal with their mental illness and

live comfortable lives. By using a qualitative study, information about the factors affecting utilization of mental health services among Latinas/os may be identified. Using interviews and finding common themes in the responses from the Latina/o participants can introduce what is most needed in the Central Valley or areas in which agencies and organizations can improve in. In addition, receiving feedback from participants on what they think would help remove potential barriers may increase the use of mental health services.

Purpose of Study

The purpose of this proposed research is to understand factors that may be impacting the use of mental health services among Latinas/os in the Central Valley's Fresno County. Additionally, understanding the outcomes of this proposed research may allow mental health agencies and providers to modify mental health services to meet the clients' needs in order to be more congruent with the responses made by participants. In addition, the implementation of new mental health programs for Latinas/os can be initiated. Programs can focus on the needs of individuals firsthand rather than assuming what would be best for the population. This study aims to provide promotion of the necessity of mental health programs and increased awareness for community members as to what is working and what needs to be changed in terms of service delivery.

For instance, one of the many programs in Fresno County, such as the Fresno County Department of Behavioral Health, can benefit from the input participants contribute during interviews. The department can take into consideration what participants think is being effective in terms of mental health services and what should be modified to improve service delivery. Implementing these sorts of changes may increase client turnover and service satisfaction from current clients. In addition, individuals in the community may probably spread positive awareness of such services to others and

recommend their services to those who need it. Overall, agencies may be viewed by community members through a positive lens.

Following this chapter, this thesis will continue to describe the study and its findings within the next four chapters. Chapter 2 will focus on the current literature available on mental health services among Latinas/os and how the literature relates to this current study. Chapter 3 will concentrate on the methodology and describe the steps taken to conduct this study. This includes how the sample and data were gathered. Chapter 4 will reveal the study findings and discuss the common themes that arose from the participants' responses. Finally, Chapter 5 will focus on the discussion of the study and its significant conclusions and recommendations for future studies.

Research Question

Since the purpose of the study is to bring awareness as to what is working and what needs to be changed within Fresno County, a research question has been derived to focus on the dynamics impacting Latinas/os' utilization of mental health services. The research question for this study was developed as follows: What factors contribute to Latinas/os' utilization of mental health services in California's Fresno County?

Implications for Social Work Practice

Although this problem has been introduced in previous research, research on the Central Valley, specifically Fresno County, is rare. This study will increase the amount of literature available for Fresno County. This study has the potential benefit to increase community resources for individuals by identifying any significant barriers that individuals may be facing when trying to obtain mental health services. Additionally, mental health professionals may learn about possible factors that may prompt individuals to seek mental health services and continue to expand those possible factors to increase the number of individuals that pursue mental health services. This study will be useful for

social workers in understanding what works and what does not work in assisting Latinas/os in receiving mental health care. Ultimately, this can be a useful tool for social workers in being able to implement such intervention strategies to motivate or empower their Latina/o clients.

Summary

Access to mental health care can be difficult for individuals who identify as Latina/o. While the need for mental health services may keep growing, no appropriate care for Latinas/os seem to initiate. The Latina/o population in the Central Valley, specifically Fresno County, keeps increasing but no research on the effectiveness of such services has been conducted. Understanding what needs to stay consistent and what needs to be modified can help providers in the Central Valley deliver culturally appropriate and linguistically accessible services and interventions to their Latina/o clients.

CHAPTER 2: LITERATURE REVIEW

According to the Substance Abuse and Mental Health Services Administration (2019), 16% of Latinas/os have reported any mental illness in the past year. Many researchers have found common factors that influence the utilization of mental health services among Latinas/os and identifying what factors increase and decrease the usage of mental health services is important (Kouyoumdjian, Zamboanga, & Hansen, 2003). Understanding what encourages Latinas/os to seek help and how to improve the factors that discourage help-seeking would be important in effective service delivery. The common factors relevant in current literature include certain demographics, cultural aspects, perceptions of mental health, which also includes previous diagnoses, stigmatization of mental health, appropriateness of mental health services and the availability and accessibility of services. Becoming aware of such factors is essential in order to distinguish how to encourage the increase of utilization of mental health services among Latinas/os in the Central Valley of California.

The basis of the literature review is twofold. The first section introduces the conceptual framework which focuses on the ecological systems theory. The second section of the literature review is an empirical literature review. The literature reviewed factors that may be affecting the utilization of mental health services among Latinas/os. The following factors affecting the utilization of mental health services by Latinas/os are: demographics, culture, perceptions, stigmatization, appropriateness of services, availability and accessibility of services. They are discussed in detail in the empirical literature review section below.

Conceptual Framework

Bronfenbrenner's ecological systems theory focuses on multiple levels of systems called micro-, meso-, exo-, and macrosystems (Ashford, LeCroy, & Williams, 2018).

This theory explains how interactions within and between the levels of systems go on to ultimately affect an individual (Ashford et al., 2018). The microsystem can affect an individual through the immediate environment (Ashford et al., 2018). For instance, this can be immediate relationships, such as family. In a mesosystem, individuals get affected through interactions among the microsystem (Ashford et al., 2018). As the systems go broader, the system starts focusing on more interactions outside the control of the individual. Exosystems, for example, can affect an individual through indirect means (Ashford et al., 2018). This indirect influence can be illustrated through the example of a parents' work schedule affecting what their child may endure, such as not being able to spend time with their parents. Finally, macrosystem is the outer system that interacts with an individual. The macrosystem focuses on entities such as the government and its policies, the economy, and culture (Ashford et al., 2018). There are many systems in a person's life that may contribute to the way a person lives. Sometimes systems may affect an individual's immediate interactions while other systems may be outside of their control.

Bronfenbrenner's ecological systems theory can give insight as to how different system levels may affect Latinas/os' utilization of mental health services. From families in the microsystem to culture in the macrosystem can influence how a person is affected and ultimately be given the opportunity or not to receive mental health care. Learning how factors in the different systems interact can give insight as to which factors are impacting a person from receiving mental health services.

Empirical Literature Review

This section focuses on an empirical literature review. It examines the factors that affect the utilization of mental health services by Latinas/os from previous research

studies. Further detailed discussion is provided for the factors that were found to impact the utilization of mental health services.

Demographics Affecting Mental Health Services Usage

In the Latina/o population, there are many differences regarding demographics that affect the usage of mental health services. Distinguishing characteristics of people, such as their ethnicity, gender, education level, and age, can affect mental health service utilization. In current research studies, findings found that some individuals who identify under certain demographics are either more or less likely to be affected by certain issues, in this case, the utilization of mental health services. Some examples of the issues are experiencing more obstacles, stigma, lack of knowledge, and inappropriate services (Barrio et al., 2008; Davis & Liang, 2015; Guendelman & Wagner, 2000; Lee & Matejkowski, 2012). Learning what demographics are significant in the usage of mental health services is important because doing so will help future providers obtain a useful impression as to how services can be effective for individuals or how individuals can be persuaded to seek mental health services when necessary. Analyzing demographics is relevant to the Central Valley because understanding variables in demographics can help understand who currently has access to services and hopefully encourage usage of mental health services.

Ethnicity. Research has found that a person's ethnicity has an influence as to whether or not mental health services will be utilized. For example, those who identify as Latina/o are less likely to initiate any mental health services compared to non-Latino Whites (Cook, Zuvekas, Chen, Progovac, & Lincoln, 2017; Lê Cook, Doksum, Chen, Carle, & Alegria, 2013). These study findings reveal that identifying as a certain ethnicity may affect the probability of accessing mental health services.

Other research showed that Latinas/os reported more obstacles to mental health care compared to non-Latino Whites based on their ethnicity identification of Latina/o (Guendelman & Wagner, 2000). When both ethnicities, Latinas/os and non-Latino Whites, had equal resources and accessibilities, Latinas/os may still struggle due to their ethnicity identification. Even within the same Latino ethnicity, some individuals with different experiences may differ in their help-seeking attitudes. For instance, Latino veterans are shown to be three times more likely to utilize mental health services compared to Latino non-veterans (De Luca, Blosnich, Hentschel, King, & Amen, 2016). There is still more research to be done to understand the differences in utilizing treatment for different ethnicities, including those from the same ethnicity.

Research studies found that Latinas/os have a more stigmatizing perception of mental health conditions compared to non-Latino Whites (Turner & Llamas, 2017). Growing up as Latina/o, they have internalized cultural ideologies regarding the stigmatization of mental health. Such positions can be difficult for Latina/o individuals to seek mental health services. Because these individuals may have a negative perception of mental health, considering their viewpoint when providing Latinas/os with mental health assistance is important.

Multiple research studies indicate the influence of Latina/o ethnicity on the use of mental health services. However, Latina/o ethnicity is not the only factor influencing the usage of mental health services. In one study, ethnicity was not a substantial predictor of who is more likely to utilize mental health services (Turner, Camarillo, Daniel, Otero, & Parker, 2017). However, the study reported that ethnicity may not have been a substantial predictor due to its variability. Since there is inconsistency among research studies, further research in the Central Valley can aid to understand what kind of impact the Latina/o ethnic identification has on the utilization of mental health services, if any.

Gender. Another important demographic consideration that may affect the utilization of mental health services is gender. Gender may predict whether or not an individual may be swayed to seek help regarding their mental health conditions. Multiple studies found that females are more likely to utilize mental health services than men (Cheng, Wang, McDermott, Kridel, & Rislin, 2018; Cho, Kim, & Velez-Ortiz, 2014; Cook et al., 2017; Kim, Jang, Chiriboga, Ma, & Schonfeld, 2010; Mendoza, Masuda, & Swartout, 2015; Turner et al., 2017). These findings can produce an understanding of any gender social differences. Understanding how each gender is influenced into seeking mental health services can provide a general indication on how to help the male gender to seek needed mental health services.

Females have been more likely to utilize mental health services compared to males. One study found that 15.9% of Latino American men reported lifetime-ever seeking mental health services (Ai, Noël, Appel, Huang, & Hefley, 2013). A potential reason as to why Latino men may report such a low number is because of their gender conformity. Some cultural characteristics related to the gender role of Latino men include machismo and the feeling of shame or embarrassment when seeking help. Machismo has been found to be significantly negatively associated with help-seeking attitudes and significantly positively associated with restrictive emotionality (Davis & Liang, 2015). The masculinity pride among Latino men can be a critical factor in determining whether or not they will seek help. If Latino men try to seek mental health services, possible barriers to initiating services are shame and embarrassment (Kalkbrenner & Neukrug, 2018). Continuing to monitor any possible differences so that there is a better way to approach the male gender when seeking mental health treatment is important.

Education. Studies have shown that individuals who have higher education are more likely to use mental health services (Cho et al., 2014; Cook et al., 2017; Lee &

Matejkowski, 2012). Those with higher education may realize how critical taking care of their mental health just as much as their physical health is. Having the opportunity to learn about mental health in college may have affected their perceptions on the topic and influenced such individuals to ask for mental health services when necessary. Higher education can not only teach individuals on the topic of mental health, but they can also learn about important symptoms that require any special attention. This includes warning signs for mental disorders such as generalized anxiety disorder, major depressive disorder, and other prevalent mental health disorders.

Age. There have been research studies who have examined the influence age may have on Latina/o individuals. Findings have shown that individuals who are older are more likely to utilize services (Cho et al., 2014; Lee & Matejkowski, 2012; Mendoza et al., 2015). These findings indicate the longer an individual lives, the more they learn about mental health and its importance. This goes in hand with previous findings of higher education associated with positive help-seeking attitudes, though not all studies showed similar findings.

One study found that Latina/o immigrant elders who were actually younger were more likely to utilize mental health services (Kim et al., 2010). Another study found that age was significantly positively related to restrictive emotionality (Davis & Liang, 2015). In other words, as individuals grew older, they tend to minimize their emotional expressions. The differences found within research tends to demonstrate how age may affect Latinas/os' utilization of mental health services. Additionally, research studies found that there are not many age-appropriate mental health services (Barrio et al., 2008). Due to this lack of age-appropriate services, age may become an important factor to consider when thinking about the reasoning for a decline in service usage.

The Importance of Assessing Culture

The Latino culture focuses on many matters that help create the Latina/o's way of living. Understanding how the Latino culture relates to mental health service usage is important because the way Latinas/os view the world influence whether or not they will take advantage of mental health services. Congruent with Latino views, mental health services can then be tailored to Latinas/os in order to increase the usage of mental health services. For example, studies have found that not having culturally-appropriate services can create barriers to those who could take advantage of services (Barrio et al., 2008; Gonzalez Suitt, Franklin, & Kim, 2016; Njeru, DeJesus, Sauver, Rutten, Jacobson, Wilson, & Wieland, 2016; Rastogi, Massey-Hasting, & Wieling, 2012; Villatoro, Morales, & Mays, 2014). Culturally-appropriate services can better meet the mental health needs of this population. Familism, fatalism, and spirituality and religious beliefs are three important characteristics of the Latino culture, which will be discussed below.

Familism. Familism, a major characteristic of the Latino culture, refers to having close and supportive family ties and that family as a whole should be prioritized over oneself (Turner, Cheng, Llamas, Tran, Hill, Fretts, & Mercado, 2016). Previous studies have found that family itself can be a key influence in mental health service usage (Ishikawa, Cardemil, & Falmagne, 2010). Research studies found that a family's opinion was a determining factor that is taken into consideration when deciding whether or not to seek treatment (Ishikawa et al., 2010). If family support was high, then individuals were encouraged to seek services (Martinez Tyson, Arriola, & Corvin, 2016; Villatoro et al., 2014). If there was a stronger family cohesion, then individual family members would be less likely to use services (Chang, Natsuaki, & Chen, 2013). Another influence regarding the usage of services was that some individuals did not want their issues to be disclosed outside of the family (Kaltman, Hurtado de Mendoza, Gonzales, & Serrano, 2014). This cultural value reflects the importance of family in the Latino culture. Therefore, suitable

services would have the family involved to encourage the usage of mental health services (Ayón, 2013; Corona et al., 2017).

Fatalism. Another important aspect of the Latino culture is fatalism. Fatalism can be described as the belief that something is bound to happen because of a person's destiny and have no power to do anything about their situation (Comas-Diaz & Griffith, 1988). Studies have found contradicting results on the belief of fatalism impacting the mental health service usage among Latinas/os. One study found that Latinas/os who have the belief of fatalism are less likely to seek help (Kouyoumdjian et al., 2003). However, in another study, fatalism did not take a role in affecting the mental health service utilization among Latinas/os (Anastasia & Bridges, 2015). Instead, research studies found that depressive symptoms were positively associated with the utilization of mental health services.

Spirituality and religious beliefs. The third factor in the Latino culture is their spirituality and religious beliefs. The spirituality and religious beliefs of Latinas/os can serve as a barrier to accessing mental health services (Kouyoumdjian et al., 2003; Turner & Llamas, 2017). For instance, study's findings found that individuals who have strong spirituality beliefs are less likely to utilize services (Kouyoumdjian et al., 2003; Turner & Llamas, 2017). Latinas/os prefer alternative ways to receive support, such as folk healers (or "Curanderos") who are spiritual leaders. Rather than receiving mental health treatment, some people prefer going to spiritual leaders who are believed to solve problems by communicating with the spirit world. Latinas/os' premise is that the root of their problem may be caused by a supernatural force (Kouyoumdjian et al., 2003). Although research has found spirituality to be a barrier, the spirituality of the Central Valley's Latinas/os needs to be investigated to better understand the population's needs. Awareness of alternative methods individuals use to heal themselves can inform mental

health practitioners of the need to integrate spirituality into their services as an option for those who have strong spiritual beliefs. Additionally, one should be aware that participants choosing to turn to spirituality and religious beliefs as an alternative way of coping with mental health issues should not be seen as a negative approach to seeking treatment.

Perceptions and Previous Diagnosis

The way a person views their mental health can affect whether or not they seek services. For example, if an individual perceives their mental health as poor, then they might be more inclined to seek treatment. However, their perceptions may not reflect their mental health self-rating, but their understanding of mental health. If an individual does not understand the symptoms of a mental health problem, they may not realize the necessity of seeking treatment. Additionally, this line of thought can apply to a person who has been previously diagnosed. For instance, if an individual has had a psychiatric history, their previous experiences may affect the way and if they seek mental health services.

Perceptions. Latinas/os may be more likely to hold certain types of perceptions about mental health services compared to other ethnic groups. For instance, in one study, Latinas/os did not seek mental health services because they thought that only “extreme” cases received assistance (Ishikawa et al., 2010). Another perception among Latinas/os was that if they saw a need in themselves or were able to recognize symptoms, then they were more likely to utilize services (Cheng et al., 2018; Villatoro et al., 2014). These findings are consistent with other studies that those who fail to recognize their symptoms may underutilize mental health services (Martinez et al., 2016). In another study, people may fail to see mental health symptoms in others such as teachers failing to recognize mental health symptoms in their students (Toppelberg, Hollinshead, Collins, & Nieto-

Castañon, 2013). Even when symptoms are recognized, they may be perceived as not important. Research studies found that Latinas/os perceive physical symptoms as more serious than mental health symptoms (Kouyoumdjian et al., 2003). Although various articles have examined the Latino population's perceptions of mental health services, studies have not been conducted to understand the perceptions of the Latino population in the Central Valley.

Self-rating on mental health. Self-rating regarding mental health symptoms is another way to assess an individual's perceptions about mental health. Rather than looking into an individual's ideologies on mental health, recognizing how they perceive their own mental health, and not just the topic in general, is important as well. Distinguishing how their self-rating affects their use of formal mental health services can bring clarity into further understanding the mental health needs of the Latino population in the Central Valley. Previous studies have found that when individuals report poorer mental health, they are more likely to initiate mental health treatment (Cook et al., 2017; Kim et al., 2010). There may be a possibility that individuals will initiate services once they realize their own self-rating on their mental health. As previously mentioned, findings have shown that when Latinas/os do not recognize their symptoms, then they might be underutilizing mental health services. This might be so because of the fact that they may have never actually had the opportunity to self-rate their own mental health.

Previous diagnosis. If a Latina/o has a psychiatric diagnosis, being assigned a diagnosis may affect the way they perceive mental health and if they will choose to access mental health services. Studies have found that individuals who have a psychiatric diagnosis are more likely to seek treatment (Cho et al., 2014; Kim et al., 2010; Lee & Matejkowski, 2012). Furthermore, another study found that people who met the diagnostic criteria for three or more psychiatric disorders were more likely to use mental

health services compared to those who only met one psychiatric disorder (Villatoro et al., 2014). In contrast, one study found that previous diagnoses did not influence the number of visits to receive mental health treatment for both Latinos and non-Latinos (Bridges, Andrews III, Villalobos, Pastrana, Cavell, & Gomez, 2014). This contradiction shows further research is needed to understand how past mental health treatment may affect future help-seeking attitudes in regards to mental health treatment.

Stigmatization of Mental Health

A vital factor that affects help-seeking of many different ethnicities is the stigmatization of mental health. In society, mental health is a topic that is usually pushed aside. The way this issue is perceived in society may ultimately affect the way certain ethnic groups utilize mental health services. Additionally, stigmatization of mental health can be viewed differently based on the individual's culture. In the Latino culture, the stigma of mental health is typically associated with negative connotations. Earlier studies have found that stigma may be a barrier for Latinas/os when accessing mental health services as they do not want to be perceived as "crazy" or bring shame to their family (Cheng et al., 2018; Fripp & Carlson, 2017; Kaltman et al., 2014; Martinez et al., 2016; Mendoza et al., 2015; Rastogi et al., 2012; Sun, Hoyt, Brockberg, Lam, & Tiwari, 2016). Conversely, one study found that stigma was not a consistent predictor of help-seeking attitudes among Latinas/os (Turner & Llamas, 2017). Instead, Latinas/os were requesting needs for mental health care and preventative services where Latinas/os did not associate stigma as a barrier in seeking services (Ayón, 2013).

Previous Experience Utilizing Mental Health Services

Previous experience when utilizing mental health services can be a significant factor for Latinas/os. Depending on their experience, experiences can either encourage or

discourage individuals to seek psychological help. Research studies found that lower rates of service utilization can be attributed to previous lower-quality care (Alergria et al., 2002). Similarly, individuals that are without previous experience tend to have less favorable attitudes toward seeking help which was mostly due to demographic variables (Cheng et al., 2018). For others, having past experiences influenced people into having more favorable attitudes towards help-seeking (Mendoza et al., 2015; Turner et al., 2017). With positive experiences, Latinas/os tend to continue to receive services later on and find them more helpful and even with negative experiences, people still manage to continue to explore services just with different options (Ishikawa et al., 2010). For some Latinas/os, regardless of the experience one had, there is still hope in continuing to receive services and demonstrate a testament to the resilient human spirit.

Appropriateness of services. Another important area that may influence the utilization of mental health services among Latinas/os is the appropriateness of mental health services. Factors include: language barriers (Barrio et al., 2008), lack of translators (Barrio et al., 2008), client-therapist interactions (Ishikawa et al., 2010; Kouyoumdjian et al., 2003), lack of representation (Barrio et al., 2008), assessment and therapy techniques (Jimenez, Cook, Bartels, & Alegría, 2013), and the type of providers available (Rastogi et al., 2012). Other research has found factors that contribute to the appropriateness of mental health services and how that has affected Latinas/os' utilization of mental health services.

Language barriers. The language barrier is one of the principal reasons why Latinas/os cannot access mental health services. Having limited English proficiency can limit the Latina/o community's access to services due to the inability to communicate with therapists in their native language (Barrio et al., 2008; Hansen & Aranda, 2012; Kim et al., 2011; Rastogi et al., 2012). The difficulty in understanding the language also

demonstrated lower awareness of the possible places to access services (Kaltman et al., 2014; Kouyoumdjian et al., 2003; Martinez et al., 2016; Njeru et al., 2016). Moreover, limited English has been found to cause misdiagnosis (Ingram, Schachter, Guernsey de Zapien, Herman, & Carvajal, 2015). Limitation use of the English language can lead to lower usage of services compared to other ethnic groups that do not experience linguistic barriers (Alergria et al., 2002). To reduce such linguistic barriers, translated services would be beneficial for Latinas/os to have (Gonzalez Suitt et al., 2016). This barrier seems to be commonly linked to the low utilization of mental health services from Latinas/os. However, current research does not focus on Latinas/os from the Central Valley in California.

Lack of translators. Similar to the issue of language barriers in the mental health field, there is also a barrier for clients in regard to the lack of available translators. Research has indicated that Latinas/os with limited English had a difficult experience in accessing appropriate mental health services (Barrio et al., 2008). These issues should indicate the need for translators to reduce these difficulties that some Latinas/os face. However, there tends to be a lack of translators which further creates more difficulties for Latinas/os in regards to language barriers and accessibility of mental health services (Barrio et al., 2008). Assessing if there are sufficient translators in the Central Valley can give an insight into the progress of agencies trying to break down language barriers in mental health services for Latinas/os.

Client-therapist interactions. When Latinas/os seek mental health services, their client-therapist interactions can determine whether or not they will continue to seek services or discontinue services. When Latina/o clients are treated with warmth, high interpersonal regard, trust, and support, then the client-therapist interaction becomes positive, providing effective therapeutic sessions (Ishikawa et al., 2010; Kouyoumdjian et

al., 2003). Considering internal factors, such as the relationship between the therapist and client just as well as external factors, such as socioeconomic status, is important to have a better understanding of the factors affecting individuals and their utilization of mental health services.

Lack of representation. Apart from client-therapist interactions, another factor to keep into consideration is the representation of the Latino community in the providers available. Sometimes, factors as minuscule as the representation of the Latino community in the providers available can affect the utilization of mental health services. The shortage of providers representative of the Latino community can present itself as a challenge and discourage the use of psychological help (Barrio et al., 2008). However, this finding is not consistent for all Latino individuals. Some Latinas/os find that representation of the Latino community in providers is not a significant consideration when receiving services (Ishikawa et al., 2010; Kouyoumdjian et al., 2003). Some clients are accepting of the idea of having providers who are ethnically different from themselves as long as they are open to learning about the Latino culture (Ishikawa et al., 2010). In fact, some Latina/o clients would prefer to have therapists that are ethnically different than themselves (Kouyoumdjian et al., 2003). This outcome from previous studies reveals that representation is probably not something to focus on when improving available resources for Latinas/os. However, since there are multiple views on this subject, examining the views of representation of the Latino community in providers among Latinas/os in the Central Valley will provide a more accurate approach to improving help-seeking attitudes.

Assessment and therapy techniques. The use of certain assessment and therapy techniques can produce either effective or ineffective services to clients. Depending on how the clients view those services, their perception of the services can be yet another

factor that contributes to the utilization of mental health services. Some therapy techniques are typically tailored to ethnic groups that fall outside of the Latino community which can result in client dissatisfaction (Kouyoumdjian et al., 2003). In addition, providers sometimes use forms of therapy in which clients are not interested in (Jimenez et al., 2013). In one study, the Latina women participants emphasized a favorable attitude towards forms of therapy that focused on supportive psychotherapy and cognitive-behavioral therapy (Kaltman et al., 2014). Other forms of healing involved the use of alternative healing practices such as *curanderos*, *herbalistas*, or other types of folk medicine providers (Rastogi et al., 2012). Using culturally-appropriate services may increase the effectiveness of therapy among Latinas/os, especially for those who are limited in the English language (Njeru et al., 2016). Moreover, further research is needed to assess how assessment and therapy techniques may affect the utilization of mental health services for individuals in Fresno County.

Type of providers. Becoming aware of the types of providers that Latinas/os use can bring awareness as to who they turn to when they do seek help. Some types of providers that Latinas/os turn to when they want to seek services may not be mental health professionals. Like previously mentioned, some Latinas/os turn to *curanderos* or *herbalistas* to utilize healing practices (Rastogi et al., 2012). Other Latinas/os may turn to nurses or primary care providers or prefer priests or religious leaders when accessing services (Dinwiddie, Gaskin, Chan, Norrington, & McCleary, 2013; Kaltman et al., 2014). These professional choices outside of mental health practitioners demonstrate the variety of providers that Latinas/os are willing to consult when needing mental health care.

In addition to providers outside the field of mental health, one study found that more than three-quarters of the participants stated that they most preferred a mental

health specialist when accessing services (Kaltman et al., 2014). This study indicates a mixture of preferences among the Latino community. When analyzing the type of providers in the Central Valley, distinguishing the variety of providers accessible to the Latino community is important. Confirming that there is a mix of providers might influence Latinas/os to pursue services for themselves. Having providers from different backgrounds can make them feel empowered to obtain the provider that best fits their needs.

Availability and Accessibility of Mental Health Services

The availability and accessibility of services is another important matter that should be analyzed when identifying factors affecting the utilization of mental health services. The availability and accessibility of services may be impacted by: socioeconomic factors, lack of insurance, lack of transportation, geographical influences, types of setting for mental health services, the number of hours of services available, lack of information on available resources, and immigration status.

Socioeconomic factors. One factor that may affect the utilization of mental health services is the socioeconomic status of Latinas/os. Studies have found that a low socioeconomic status may contribute to challenges when accessing mental health care (Kouyoumdjian et al., 2003; Martinez et al., 2016; Rastogi et al., 2012). Individuals have described such services as costly and cannot afford to receive treatment (Kaltman et al., 2014; Kouyoumdjian et al., 2003; Rastogi et al., 2012). Having a low socioeconomic status may contribute to other external issues such as lack of transportation (Barrio et al., 2008; Martinez et al., 2016). Having no reliable transportation may limit the accessibility of receiving mental health care. If there are no dependable means of transportation, then individuals may not be as motivated in utilizing mental health services.

Socioeconomic status as an issue was not congruent with the findings of other studies. For instance, research studies found that those who were living in poverty were more likely to utilize mental health services (Cho et al., 2014; Lee & Matejkowski, 2012). Understanding how individuals with low socioeconomic statuses are able to retrieve mental health services will be beneficial for those with the same socioeconomic status but are unable to obtain services. Learning what helps those individuals will help others with similar struggles.

Lack of insurance. An additional factor that affects the accessibility of psychological help is the lack of insurance. For some individuals, especially those that are noncitizens, having no health insurance is fairly common. Participants have stated in studies that having that lack of insurance makes them less likely to use mental health services (Cho et al., 2014; Lee & Matejkowski, 2012; Martinez et al., 2016; Villatoro et al., 2014). This lack of health insurance can be as a result of its high cost to purchase coverage. This goes back to the barrier of those with low socioeconomic status. If those who have low socioeconomic status cannot afford the use of mental health services, they are more likely to be unable to afford insurance or any sort of other care. Additionally, some individuals do not have insurance because their job does not provide them with insurance. For instance, there is no surprise for those who are agricultural workers to lack health insurance.

Geographical influences. Depending on the location of services and where an individual lives can affect the utilization of services. Research studies found that Latinas/os who live in a remote Latino neighborhood and have high Latino centralization are limited geographically to accessing psychiatrists (Dinwiddie et al., 2013). This geographical limitation can be a concern for individuals rather than providers and or staff (Ingram et al., 2015). On the other hand, others identified that the location of services or

where they reside was not a primary concern (Kaltman et al., 2014). Locations of services is a factor that should be considered when implementing programs.

Hours of services available. Hours of services can affect the availability of services for individuals. In one study, participants discussed that the hours available for services sometimes impacted their ability in making appointments for mental health treatment (Kaltman et al., 2014). However, this issue was a concern for less than half of the participants in the study. Their main concern with the hours of services was that they were unable to get to the sessions due to work scheduling conflict (Kaltman et al., 2014). Some of the participants' work schedules were not flexible or they were unable to get out of work to attend their appointments (Kaltman et al., 2014). Other participants that preferred appointment times during the day stated that this option was beneficial for them because the flexibility of scheduling an appointment helped to go to their sessions when their children were in school (Kaltman et al., 2014). This statement was brought up by the participants who did not work outside the home. To improve Latinas/os' ability to utilize mental health care, there should be more of an effort in providing mental health care during later-than-usual business hours or on weekends. Doing so will increase the chances of individuals seeking help.

Lack of information on available resources. Another factor that may contribute to the underutilization of mental health services in regards to accessibility is the lack of knowledge and awareness of available services. Latinas/os stated that not knowing what services were available or where to seek services were barriers in utilizing mental health care (Ayón, 2013; Barrio et al., 2008; Ingram et al., 2015; Martinez et al., 2016). This issue can be tied back to the language barrier they face. If the promotion of services is being held in a language that individuals do not understand, then this language barrier only enhances the lack of information available for these individuals. Had these

individuals known about the services provided in their area, their knowledge of the availability of services may increase the likelihood of them taking advantage of the services. Analyzing what will help to increase the knowledge of services among individuals is important. The lack of information on available resources should be determined if the lack of information is based on culture, language barriers, or just the fact if there is no effort at all to demonstrate to Latinas/os that these services exist.

Immigration status. A major factor that plays a role in seeking mental help is the legal status of an individual. Findings have found that undocumented individuals do not access mental health treatment due to fear of being deported (Lee, Laiewski, & Choi, 2014; Martinez et al., 2016). Such immigration policies have caused detrimental effects, that there was an association established between immigration policies and the rate of poor mental health for Latinas/os compared to non-Latinas/os (Hatzenbuehler et al., 2017). These immigration issues have made individuals fear of getting deported on their way to their appointments (Joseph, 2017). Experiencing anxiety when trying to seek services while dealing with mental health issues may worsen their symptoms. Assumptions can be made in that worsening their symptoms to try and receive help is not worth the anxiety for some, especially experiencing fear of deportation if they do obtain help. It is unfortunate that people live with their symptoms and in fear when instead, they should be receiving help. Further research should be obtained in order to investigate ways in which this fear and anxiety can be reduced and increase their likelihood of obtaining help from facilities.

Gaps in Literature

After reviewing many research studies, their findings provided an abundant amount of information on the factors that impact mental health service utilization among Latinas/os. However, one of the gaps within the literature is the lack of research on

Latinas/os in Fresno County. Although previous studies' findings are informative, conducting research on Latinas/os in Fresno County provides a new perspective on that population. Focusing on Latinas/os in Fresno County helps to determine if factors found in past research are also impacting Latinas/os' utilization of mental health services in Fresno County or if further examination is required.

Summary

The research available gives insight as to what variables may be important to address regarding mental health services among the Latino community. Assessing whether or not factors mentioned in previous research such as demographics, culture, perceptions and previous diagnosis, stigmatization of mental health, appropriateness, and availability and accessibility affect Latinas/os when utilizing mental health services is important. The following chapter will review the steps taken to conduct this study and assess the factors that affect Latinas/os' utilization of mental health services in Fresno County.

CHAPTER 3: METHODOLOGY

The purpose of this methods chapter is to bring an understanding as to how the study was conducted. This chapter focuses on the type of study, participants, sampling criteria, sample size, instruments used, method of data collection, discussion of its validity and reliability, data organization, data analysis, and an evaluation of my choice of method. Gathering this information will develop a clear outline for the study and will bring clarification as to how this study was conducted.

The research question, which was discussed in Chapter 1, focuses on determining which factors commonly influence Latinas/os in seeking or receiving mental health services. To reiterate, the research question is as follows: What factors contribute to Latinas/os' utilization of mental health services in California's Central Valley? To answer the research question, careful consideration in the methodology was taken in gathering imperative information from participants.

Definitions

To gain a better understanding of the study, the following terms will be defined to help clarify any miscommunications or misunderstandings between participants and researcher. The main terms utilized in the study were: "therapist" and "mental health services."

Therapist

The way that "therapist" was defined to participants was as providers who assist individuals in relieving symptoms regarding their mental health. This term was used interchangeably with "provider," "counselor," "psychologist," and "social worker." In addition, further explanation was given in that therapists were able to hold sessions and utilize certain therapy techniques and interventions with clients.

Mental Health Services

Another term that was often used in this study was “mental health services.” This term was used interchangeably with “mental health care,” “services,” and “psychological services.” It was clarified that this term referred to individuals seeking services that involved meeting with a provider in order to reduce symptomology that negatively impacted their mental health. Any professional service that involved improving mental symptoms was considered to be mental health services.

Design of Study

This study used a qualitative approach with a phenomenological focus to understand the lived experiences of the participants (Creswell & Poth, 2018). Comprehending the lived experiences of the participants can provide insight as to what factors may be affecting their mental health service utilization. Themes were identified and organized into clear sections to provide the findings. The findings indicated what participants have experienced and how their experiences transpired (Creswell & Poth, 2018). Employing a phenomenological qualitative approach will report participants’ common factors that influence the utilization of mental health services.

To understand the multiple perspectives of participants, utilizing a qualitative approach provides the research study participants the opportunity to express their unique experiences. In addition, this approach helped the researcher further explore additional information regarding the participants’ experience with mental health services in Fresno County. Its phenomenological focus helped to bring awareness of the participants’ lived experiences and provided the opportunity to explore how participants may have experienced mental health services in Fresno County (Creswell & Poth, 2018). The data was then analyzed, examined, and interpreted to better understand the participants’ responses and identify the meanings of the participants’ experiences.

Participants

The population in this study were both males and females who were 18 years old and older. To be included as a participant in this study, they must have considered receiving mental health services but refused, have received services but terminated, or were currently receiving mental health services. To assure that these participants met the study's requirements to participate, they were asked before participating if they met the requirements mentioned above. To access the necessary participants needed for the study, they were asked if they considered or received mental health services in Fresno County before. In addition, the participants must have identified as Latina/o or Hispanic.

Exclusion Criteria

Individuals were not included in this study if they did not meet any of the requirements in the inclusion criteria. If they received mental health services outside of Fresno County, they could not participate in the study. In addition, individuals were excluded if they did not meet the required consenting age or did not identify as Latina/o.

Sampling Plan

In regards to the sample, getting an adequate sample size was important. Seven participants were gathered to obtain data appropriate to the study and to extract important common themes. Due to limited resources, the utilization of probability sampling was not available for this study. Instead, a non-probability sampling method was chosen to select the sample. Non-probability sampling refers to gathering a sample in which individuals in a population do not have an equal chance of being included in the sample (Creswell & Creswell, 2017). Instead, they are chosen due to convenience which resulted in the participants being mostly college students. Non-probability sampling allowed the utilization of methods that focused on purposeful and snowball sampling. Purposeful sampling means purposefully picking participants who would help answer the research

question and understand their lived experiences (Creswell & Creswell, 2017). Lastly, snowball sampling is when the participants were asked to inform other individuals who were interested and eligible to participate in the study (Lewis-Beck, Bryman, & Liao, 2003). Using this approach increased the number of potential participants for the study.

In regards to purposeful sampling, flyers were uploaded on social media to promote the study and invite individuals to participate in the study. To make sure that individuals were aware of the announcement, multiple platforms were utilized to give people the opportunity to partake in the study. Social media platforms used included Twitter and Instagram. Accompanying the flyer, people were encouraged to share the post. Multiple people joined in spreading awareness of the study which resulted in reaching a wide range of prospective participants.

In addition to purposeful sampling, snowball sampling was used. Once participants finished the face-to-face or wired technology interviews, they were asked to inform others who may be eligible and interested in participating in the study. This action was completed to increase the recruitment of participants.

Instruments

Prior to the interview, participants were asked to sign a consent form (Appendix A) and complete a demographic questionnaire (Appendix B). The demographic questionnaire included questions regarding their age, gender, level of education, employment status, relationship status, and household income. After completing those two forms, the interview was initiated, which included 19 questions. These questions centered on the participants' understanding of mental health services, their experience with mental health providers, their experience with mental health services, and their satisfaction with the mental health services provided in Fresno County. These instruments can be located in the appendix along with the initial recruitment flyer (Appendix C).

Data Collection

In order to collect data, participants engaged in a face-to-face or wired technology interview with the researcher. The approximate duration of the interview was about 45 minutes. After the participants showed interest in the study, they were asked to pick a date and time that would work best for them for the interview. The interview was conducted in a private space in the library at California State University, Fresno where the participant could feel comfortable and express their opinions. The wired technology interviews were conducted in a private room to respect the participant's privacy and confidentiality. The participant was informed that everything would be kept confidential. To obtain consent from the participant, the researcher provided the participant with a consent form to sign that further explained the study and what they should expect with the data that would be collected. By utilizing the interview guide, participants were asked about their demographics and in-depth questions were posed about their experience of using, or not using, mental health services in Fresno County. Further follow-up questions were asked depending on the answers given by the participants. Before conducting the interviews, the participants were informed that the entirety of the interview was recorded using the Voice Memos app on a personal MacBook Air and iPhone 11. The interviews were then to be transcribed verbatim. Both the MacBook Air and iPhone 11 were set with password security to protect both the audio recordings and the transcripts. Participants were also informed that after the study took place, their audio recorded interviews would be deleted.

Validity and Reliability

A study has to be both valid and reliable as to increase the credibility of the study's findings. In order for a study to have validity, the choice of methods used in the study should measure what is hoped to be measured (Creswell & Creswell, 2017). In other words, validity ensures whether or not the choice of instruments focuses on

answering the research question. In this study, in order to increase validity, approximately one-hour interviews were recorded and transcribed verbatim. Data collected included both positive and negative factors, relationships with providers in the field, and even their understanding of the material. Developing probes during the interview, if information became unclear, was another way to address validity concerns by making sure that participants' responses focused on mental health services.

Reliability, on the other hand, focuses more on whether or not similar results will emerge when the study is continually repeated (Creswell & Creswell, 2017). To increase reliability, emerging themes were discussed with the thesis chair and a coding plan was created with approval from the thesis chair. Several questions were developed in a manner that would ensure thorough responses from the participants. If the interview guide was continually used, others would find that individuals would answer in a similar manner with possible emerging common themes.

Data Organization

The data were analyzed and organized based on emerging themes. The data were first transcribed verbatim. Then the transcripts were read thoroughly and repeatedly to identify significant themes based on the information. Categories were then created by the researcher to bring several themes together while considering how the relevant themes interconnected with one another.

Using a thematic analysis of the data uncovered the most influential factors found among participants. The themes that emerged from the data included both encouraging and discouraging factors among Latinas/os regarding the utilization of mental health services. The themes allow for a discussion on what factors may increase usage of services as well as what changes should be implemented in order to improve the services provided in Fresno County.

Evaluation of Method

A qualitative approach with a phenomenological focus is useful for gathering in-depth information on participants, however, this approach has its disadvantages. This choice of method limits the ability to gather a large sample of participants and generalize the findings to the population. Since the study called for obtaining data through interviews, the focus was on a smaller sample in order to analyze participants' responses on an in-depth level. This issue leads to another limitation. The choice of study methodology involves the interpretation of the data in which the researcher's biases may influence the analysis process. Literature regarding Latinas/os and mental health services were examined before the study was conducted, thus, certain expectations of the outcome may have been unduly influenced. This bias could impact the probes asked of the participants during the interviews as well as influenced the data analysis and interpretation.

Summary

The purpose of the methods chapter was to outline the steps taken to conduct the study. The chapter focused on the type of study, targeted population, sampling plan, data collection, and plan of analysis. In addition, certain issues such as limitations were explored that should be taken into consideration in regards to the findings, discussion, and possible future studies.

CHAPTER 4: FINDINGS

This chapter focuses on the findings following the analysis of participants' interview transcriptions. The process of the analysis was completed utilizing a thematic structure. The procedure was previously discussed in Chapter 3. In this chapter, significant themes that emerged from the participants' interviews will be discussed regarding provider characteristics, factors that both discourage and encourage mental health service usage, participants' current coping methods, and any changes participants would make to the mental health services offered in Fresno County.

Demographics

To have a better understanding of the population of this study, the demographics of the participants will be presented. From the seven participants, five were females and two were males. Ages in this group ranged from 20 to 25 years old with an average of 22 years of age. Three participants completed a Bachelor's degree, two obtained high school diplomas, and two chose "other" in regards to the level of education completed. These two "other" participants indicated having completed some college and being certificated as their level of education completed. Three participants were full-time students, two were part-time employees, one was a full-time employee, and one participant indicated being a full-time student and part-time employee. Regarding their relationship status, five participants were single, one was engaged, and one was married. Lastly, participants revealed their yearly household income in regard to their financial status. Three participants stated earning between \$0 to \$9,999. Two participants indicated earning between \$10,000 to \$19,999. One participant mentioned earning between \$30,000 to \$39,000, and the last participant revealed earning \$40,000 or more.

The demographic information of the study's participants provided an understanding of the study's sample characteristics. The study's participants cannot be

generalized to an entire population and should be kept into consideration when reviewing the data.

Thematic Findings

The following findings were categorized as thematic findings. The five common themes focused on: (1) characteristics participants look for in providers, (2) discouraging factors impacting mental health service usage, (3) encouraging factors impacting mental health service usage, (4) alternative coping methods, and (5) recommended changes by participants for Fresno County mental health services. Regarding the characteristics of the participants, several subthemes emerged that focused on gender, ethnicity, and the ability to establish rapport. Discouraging factors included Latino culture and its family, machismo, religious aspects, and accessibility. Such factors highlighted issues regarding location, time, and cost, the lack of awareness of services, and prior negative experiences with mental health services. Encouraging factors focused on participants' perspectives of friends, escalation of symptoms, and improvement in symptoms. The current coping methods were related to substance use and meditation and deep breathing. Finally, recommended changes by the participants focused on increasing diversity, cultural training, awareness, and providers available, while exploring different methods of outreach, expansion of services, and educating communities about mental health.

Provider Characteristics that Participants Look For

One of the themes that emerged from interviewing participants was that some participants indicated preferred characteristics they would like to have in their mental health provider. The characteristics included gender, ethnicity, and the ability to establish rapport.

Gender

Three participants indicated that they would prefer a certain gender when deciding on a mental health provider. One of the reasons for this preference was due to feeling like they would feel more comfortable. Two participants felt that with a choice in gender preference, they would have someone that could better understand their situation and relate to them. Having this gender preference gives the study's participants the sense that their choice in gender will ultimately provide comfort to individuals.

The second reason for a gender preference was due to the participant's life experience with an encounter of a certain gender. Two participants expressed having had a negative experience with a man and felt that in order to be comfortable when receiving mental health services, they felt that taking gender into consideration is a significant factor in order for services to be effective. They mentioned that receiving services from a male provider would make them feel uncomfortable to talk in session having had their negative experiences with them before. One participant reported:

I also considered gender. I felt like a woman would understand me more than maybe a male. And I think because the reason I was going to mental health services was because of a male, like I just didn't feel like I would feel comfortable sharing what had happened with a male. So, I think gender and gender is something that I took into consideration.

It appeared that they tie their preferred gender preference to the feeling of comfort. This is significant as comfort may encourage individuals to seek out mental health services.

Ethnicity

Another characteristic of mental health providers that participants seek is ethnicity. One participant mentioned ethnicity as an important factor. He felt intimidated if the provider happened to be of a different ethnicity as he felt that providers may not be fully sensitive to the racial and ethnic issues that he has endured throughout life. This

preference in ethnicity related back to the feeling of comfort and giving individuals the feeling of being able to relate to the provider:

I feel like that's tied in with the second thing, which is race. If you're white, I'm not gonna feel comfortable with you because of the fact that you intimidate me many more times than not. Like literally, there've only been like two times where I was proven wrong, where somebody who was white was like not that bad person when it came to like racial and ethnic issues and understanding comprehension and sensitivities.

This participant exhibited just how many times he has experienced intimidation due to another ethnicity. Making sure that providers identify any biases may possibly help clients feel more comfortable when interacting with providers.

The Ability to Establish Rapport

Another important characteristic that participants mentioned was that providers should exhibit was the ability to establish rapport. Within client-therapist interactions, the provider should exhibit the ability to facilitate empathy. Empathy can be demonstrated to clients through agreement, positive respect, and understanding of the client (Rogers, 1951). For example, some of the participants mentioned that providers should have empathy when working with clients. If empathy was absent in a provider, one participant mentioned feeling that the provider did not care about the clients and their situations. If empathy was present, the participants felt that it was easier to talk to the provider who showed a willingness to listen.

Other skills that participants mentioned a provider should have are strong communication skills and being open-minded. One participant mentioned that she preferred someone to offer her services if they are good at communicating with clients. She stated that if the provider does not show this characteristic, then she felt like clients

are not being treated equally or respected. For instance, she mentioned that if a provider does not have strong communication skills, then she felt like there might be a chance that some clients may experience better services than others. Her belief in this impression then goes to the idea that these sorts of providers should not be in the field to provide mental health services. Additionally, being open-minded as a stance by the provider was stated as a quality that a provider should embody. Another participant said that having an open-minded provider made him feel safer to open up to someone who does not say anything judgmental, ignorant or with malice. The participant had mentioned the following:

So it's like you have to have people skills in order for you to work in this area because if you don't have people skills, then what are you doing here?...I mean, you have to have a stable personality, a stable, I guess, state of mind throughout your whole shift. Because if you're not and you treat another person differently than you treated the first person, then you're not giving them that same, you know, starting line, you know? It's not your field.

These skills of rapport that include empathy, respect, and genuineness as provided by a mental health provider are positive attributes that can relate to effective service delivery.

Factors that Discourage Mental Health Service Usage

To be able to gain an understanding of the factors that affect utilization among Latinas/os, one significant theme that was analyzed dealt with the factors that discouraged mental health service usage. Within these discouraging factors, the common elements that were present included culture, accessibility, and the current mental health services available.

Latino Culture

One of the biggest factors that discouraged mental health service usage mentioned by participants was culture. Culture was mentioned by every participant and although they all experienced culture a bit differently, their culture still related to the fact that it sometimes discouraged them to utilize mental health services. Regarding the Latino culture, participants mentioned that mental health issues and services carry a negative connotation. For instance, one participant mentioned how suffering from any sort of mental health issue is seen as “crazy”:

I feel like that for Latinos especially, I think they just associate any mental health, like depression, bipolar, all of that, I think they just associate it with, if you have that, you're crazy. You're not normal...I don't think any parent wants their child to go through something like that. So, they choose to deny it or say, “Oh, you're crazy if you feel like that.” And like I watch a lot of *novelas* in different cultures too. And, you know it, it all talks about different things, you know, especially like suicide and stuff. Like, “Oh, we didn't know. We didn't know.” But you do know, you can see the signs. You just choose not to pay attention to them.

This example gives a glimpse into the way Latino culture views any sort of mental health situation. This experience demonstrated a nonexistent contribution to a person's well-being. Some further aspects of the Latino culture that participants mentioned to discourage mental health service usage was family, religion, and the stigma mental health services carry.

Family. To continue on the topic of Latino culture discouraging mental health service usage, another significant factor that caused some discouragement among some participants was found to be family. Many participants mentioned that many of their family members were not supportive of the participants receiving mental health services. Their families opposed that the participants receive mental health services due to the

belief that the topic of mental health carried a negative connotation, they were seen as “crazy,” or services were deemed to be useless. One participant mentioned that her family went as far as ridiculing mental health services or found the services to be “stupid” as a counselor could not help solve her issues:

At that point I was like, I need help. And I thought about counseling and I was like, no, the reason why I didn't go was because people or more of my family and close people to me. I mean, they made fun of counseling. For them it was like, “You don't need that. Counseling's stupid.” I mean they would see it as a joke. Like, “Oh, you're gonna lay down on a couch and you're going to tell this person all your problems and what are they going to do? They're not gonna do anything for you, they're not going to solve your problems.” And that's how I took it. I was like, you know, how is someone that you don't know going to solve your problems? And that's the mentality that was going on in my head. I was like, yeah, well the counselor is not gonna solve my problems.

As family is a big part of the Latino culture, considering their opinions on the topic of mental health can be taken into deliberation when determining whether or not participants would want to receive mental health services.

Machismo. Another important factor that discouraged the use of mental health services among participants was the stigma that mental health services carried, which is similar to the negative connotation previously mentioned. As a consequence of the stigma mental health services carry, some participants felt shame and embarrassment when receiving or considering to receive mental health services. However, one stigma that was commonly brought up during the interviews was the male stigma regarding mental health. One of the participants discussed how he grew up with the pressure of maintaining that traditional male role when receiving mental health services:

When you're a man, like, 'cause we come from such a huge culture of *machismo*, it's important to be manly and to show your manliness, you know what I mean?...That toxic masculinity is super, super huge in Latino and Mexican culture. 'Cause it's like, you know, you have to be the manliest man then it's like, it's hard to show that weakness and to give into that weakness and seek that help just because it's so ingrained in us that it's the wrong thing to do because you have to be manly and you have to stand up for yourself and if something's wrong with you, you've got to fix it yourself. 'Cause it's like, it's your job to be that pillar, right? And especially hold the family together and be the provider and things like that.

His insight on this topic demonstrated the difficulty some males face when determining if mental health services are something to consider. This example shows the pressure males face to have to hold up to their family's culture and expectations. This response can show how male stigma may easily discourage individuals from ever wanting to receive mental health services.

Religion. The last common feature that a couple of participants mentioned that discouraged mental health services was religion. One participant mentioned that her family focused on religion as finding solutions to life's problems. She expressed that her family would encourage her to obtain help from her faith. Her family emphasized that searching outside of religion for answers was not okay and would be disappointed in her if she did not rely on religion:

Well for me, my religion is a big part of me and so is my family. They're like, what? Ninety-eight percent of me and the other two percent is like my opinions...I feel like that's what controls me. I guess you could say controls me, but I don't want to say control 'cause I don't feel like I'm being controlled. But it's

just the mentality of that is just what I've been raised, I guess you could say. So, I'm always going to be looking to get approval from my family and being inside like the box of religion.

She was able to highlight how religion can be a major factor in the opposition to mental health services for participants.

Accessibility

Accessibility was another common theme found to be challenging for some participants. Not being able to have access to mental health services has negatively impacted participants' ability to receiving mental health services. Some of the common responses that the participants gave that disrupted their accessibility of mental health services included location, time, and cost.

Location. A couple of participants mentioned how location was an issue in regards to accessing mental health services. For example, one participant mentioned how sometimes services are located in a different area of the city and no transportation is available for individuals to reach that location. Sometimes, even when there is public transportation, utilizing public transportation would take an individual many hours just to get to the location which can be a great deal of time and discourage people from seeking or receiving mental health services. Another participant mentioned how the location of services is an issue for him. For instance, he mentioned that while enrolled in college, accessing services was difficult as he would spend time in different cities. Having to keep up with the location of services was a factor in determining whether or not services would be acquired:

I did look for help outside of school and obviously like when I went back home too. But it was just, it would have been too difficult to like go there and come back and then like, yeah and it's always like an issue of motivation too.

Time. Apart from location, time was another factor that affected the accessibility of services. Several participants mentioned how they have to deal with other areas in life, such as their children, school, or their job that they did not have time to incorporate mental health services in their lives even though they found mental health treatment to be necessary. Having to deal with all of those responsibilities discouraged them to receive mental health services as those areas in their lives were prioritized instead. For instance, one participant mentioned barely having enough time to complete homework while other participants mentioned not being able to leave work to get to their appointments on time:

Well, I think so far it's just school and work. I wouldn't say discouraged. I would just say, you know, I just don't, I can't find the time to go. Weekends I use it for my kids. I barely use it for homework. I should really, really start getting my stuff together.

Having to struggle with managing their responsibilities and time has ultimately been mentioned as a way to dissuade participants from utilizing mental health services.

Cost. Lastly, cost was another factor in preventing individuals from using services. Many participants mentioned that cost was an issue when accessing services because they felt like they are unable to pay for it. Even with some participants expressing that they have health insurance, they are limited to certain providers and services in Fresno County. One participant said the following regarding finances being an issue:

Um, money is one of the biggest things, um, when choosing mental health services. That was one of my biggest things is I don't want to be having to pay every time that I go, especially because it was so often. So, I think money was one of the biggest factors.

Cost is a crucial aspect in deciding whether or not participants have the luxury of affording services for their mental well-being. Rather than spending money on services, participants have mentioned focusing their expenses on things they prioritize instead, like food, their homes, or other necessities.

Current Services Available

The last substantial theme presented in the responses that the participants gave was regarding the current services available. While services are available in Fresno County, the participants described that those same services were the ones that discouraged the utilization of mental health services. For instance, participants made note that they were unsatisfied with the current services available because of the lack of awareness of services to participants and prior negative experience with mental health services in Fresno County.

Lack of awareness of services. When asked how satisfied participants are with the current services available in Fresno County, one of them stated, “Well, I don't really know a lot about the services. Like what there is...But I'm sure they had some too like at school, but I never heard of anything.” She emphasized how she was unaware as to what there even is in Fresno County. She highlighted how agencies lack in informing community members as to what services are offered that individuals can take advantage of. Since she was unaware of what to even search for, she felt that the lack of awareness had unmotivated her to seek mental health services as she does not know what, who, or how to approach the situation.

Prior negative experience. Another participant described having faced a negative experience when participating with services regarding her mental well-being. One participant reported that while she went to therapy, she felt like the services she received

were overall good. However, a prior experience with a 5150 hold, which is an involuntary hold put on a person when they are deemed to be in imminent danger to themselves or others, was handled in a negative manner as described by one participant:

I remember where the security guard was really rude. He said something to one of the kids and I said, "That was really rude. We're just as normal. We're normal people just as much as you are." And he said, "Well, if you were normal you wouldn't be here."... There needs to be changes. Especially I feel like how they approached the situations. Like for me, I was surrounded by people and I didn't like that. My mom was here, the guy with the briefcase and then like four cops on this side of the room. And I was literally just sitting in the corner of the room in a ball. As much as I could form into a ball because I didn't want to move. I didn't want to do anything. And then they were just like, "Come on, come on out." Like no, leave me alone. Give me some room to breathe first. But I didn't say that. So, I was just crying.

As she described, having to face an adverse experience with mental health services just like hers can discourage others to search for mental health services. This sort of experience can shape a person's expectations about the services available and generalize such an occurrence to any other services offered.

Factors that Encourage Mental Health Service Usage

Not only were discouraging factors revealed within participants' interviews, but encouraging factors were taken into consideration as well. The common findings that emerged regarding factors to encourage the utilization of mental health services included friends, positive outcomes with mental health services, and the escalation of symptoms.

Friends

One surprising finding from this study that was common among most participants was that friends were a huge motivator in seeking or receiving mental health services. Many participants stated that the friends in their lives encouraged them and pushed them to give mental health services an opportunity. With one participant, even after going to therapy once and felt like the experience only made the issue worse, she had her friend push her into giving therapy another opportunity. These participants felt like friends were there to provide a safe space for these participants to talk about their mental well-being. One participant stated:

Mostly like really good friends noticed that I was struggling, you know? It was just like, it stopped being a matter of should I? And started being like, you should, you know? I stopped questioning it because I was led through it and it was just, it was the best thing to do.

This participant demonstrated the gratitude towards having close friends that were there for him and encouraged him to follow through with initiating on working on his mental well-being. This finding demonstrated that despite some participants having family members who were not supportive, having at least one person in your life can still increase the chances of motivating others to continue on a positive path to mental health.

Escalation of Symptoms

All participants shared in the study that their escalation of symptoms was a factor in searching or receiving services. Participants shared that their symptoms disrupted some sort of daily functioning. Participants expressed that they experienced feeling overstressed, symptoms of depression, and others reported having symptoms of anxiety. One participant mentioned that she would physically feel sick, vomit, her heart would race, she would hyperventilate and her sleep would be disrupted because of anxiety:

I was sick. Like I had hella anxiety. I would freaking wake up all panicking for no reason. I would be all hyperventilating; my heart racing and it would just get to the point where I'd throw up and that would happen all the time for like a month. And then I started self-medicating to help and that helped me out. And now I'm not so bad. I still get like attacks, but I know how to control it now. I know how to control my breathing and just basically that. But sometimes that doesn't work, you know, I'll get all anxious for no reason.

Another participant described his symptoms as feeling like he “hit rock bottom.” To cope with these symptoms, one participant stated that he would go to therapy because he considered therapy to be a healthy outlet to sort out his emotions and help decrease his symptoms. In general, these disruptions in their lives influenced one way or another to consider integrating mental health services in their lives.

Positive Outcomes

Other than friends, another factor that encouraged individuals to consider or continue with mental health services was the positive outcomes some participants had. These participants described a prior positive experience or seeing an improvement in symptoms to influence their decision of giving mental health services an opportunity.

Prior positive experience. While prior negative experiences with mental health services discouraged individuals from obtaining services, there were positive experiences that encouraged individuals to receive services too. When interviewing participants, participants mentioned how having some positive experience with mental health services persuaded them to continue to receive services. For instance, a few participants mentioned that the providers they interacted with started to gain their trust and were becoming effective. They were now able to easily talk to these providers and start working on their issues and what has been disrupting their mental well-being:

I really did get help. She helped me make sense of my emotions. It helped me also be able to open up and actually talk about what happened. Like before I could start talking about it and I'd automatically start crying. Like it'd bring tears to my eyes and now I use it as an experience because you use everything to learn, you know? But I felt like she did help. She did help me. She made sense of my emotions. She helped like help me figure out ways how I could relax when I'm starting to have like a panic attack or something. She'd give me therapeutic ways to relax myself.

Their everyday functioning and thoughts started to lead in a positive direction for them. In other words, participants found that by having some positive experience with either providers or the services itself, they found that these positive experiences would more likely influence others to consider mental health services as well.

Improvement in symptoms. Similarly to having a prior positive experience with mental health services, an improvement in symptoms motivated individuals to keep receiving services. One participant mentioned that after some time of being in therapy, he noticed that he started to obtain a different perspective on his outlook of life:

I felt like I was getting better. I really did. I really felt like I was being pushed in the right direction just by the things I was hearing or the things I was saying. It was really encouraging to just make those breakthroughs and make those changes and see that something good might just be on the horizon and it's like, it's important to see that too.

Some participants realized how effective these services were and encouraged them to continue with that path. Giving these services an opportunity and noticing how symptoms were decreasing and allowed them to better themselves encouraged individuals to continue to receive or seek services.

Alternative Coping Methods

Though some participants indicated that they never received services due to discouragement, they still had means of coping with their symptoms. As such, participants found alternative ways in managing their mental well-being, both positive and negative whether through the use of substance use or meditation and deep breathing.

Substance Use

One of the ways that participants started to handle their symptoms when services are not being utilized was the use of substances. One participant mentioned that she would self-medicate with marijuana as a way to lower her symptoms of anxiety. Although effective for her, she mentioned that her family disapproved her use of marijuana as a way to cope:

When I had told my mom about me getting anxiety and stuff, she wasn't happy about me like self-medicating. She would have preferred me to take pills from the doctor and I was just like, that is gonna fuck me up so much more. Like you have no idea. And so, I just didn't listen to her, but it's because they're so against like weed and crap. But like that's the stigma. Like, you know, Latinos, like you can't be sad 'cause that's not real. And smoking makes you a criminal. I don't know. She felt that dealing with her family's disapproval of her method of healing while in addition, dealing with the way her family did not believe in her anxiety was difficult. Rather than finding ways of being supportive in her life, she felt that her parents just wanted her to get prescribed medication for her anxiety and forget about the issue.

Meditation and Deep Breathing

Another way that participants have found to cope with their mental health issues was through the use of free resources available online. One participant mentioned that she would practice her deep breathing and meditation through the use of calming apps on her

phone or through guided meditation videos on YouTube. She reported, “I could do YouTube videos... I downloaded like a calming app and it just gives me little tricks of how to ground myself. For anxiety.” This particular participant found that these sorts of coping methods were useful when she started feeling overwhelmed. Spreading awareness of such available free resources is important as these resources can assist individuals with their mental health if they are unable to receive any services or talk to any providers at the moment.

Recommended Changes by Participants to Fresno County Mental Health Services

After learning what participants have experienced regarding their journey in considering or receiving mental health services, they were questioned as to what they would do to improve mental health services in Fresno County. Each participant gave suggestions as to how services can be modified to create a more positive outlook on the utilization of mental health services. The changes participants would recommend included: increase in diversity and cultural training among providers, an increase in awareness of services, different methods of outreach, expansion of the services available, increase the number of providers available, and educating communities on the topic of mental health and its services.

Increase Diversity and Cultural Training

One of the many changes that the participants said they would make to mental health services in Fresno County is to increase diversity and cultural training. One participant felt that this change needs to be implemented in Fresno County as he struggles with having to deal with being outed without his permission and managing his legal name in paperwork due to providers’ lack of understanding of the situation:

Have actual consequences and train them not just by like looking at a lecture and...like there's an actual consequence because I can't tell you how many times we have to advocate for people so badly to get any type of change, whether it's like something sexist or racist or homophobic or anything at all.

He felt that having providers who are diverse and culturally understand his background will increase sensitivity in the way they approach clients. Having this cultural sensitivity will not only decrease the lack of understanding but also increase the appreciativeness clients feel when providers take the time to learn about them. This participant felt that providers who took the time to learn about the client increased the rapport and trust between them and help build a healthy, positive working relationship.

Increase Awareness

Another common suggestion that participants made was to increase awareness of the services that were available. During interviews, participants stated that they lacked an awareness of what services were currently available. One participant stated that she had difficulty learning about what services were available even though she was more likely to be better informed about resources:

I know that there's services available but that's me...Like not everyone knows about all kinds of services...People should be educated on these services and how to get to them. So, I think they just need to like let people be more aware.

This participant emphasized the importance of increasing awareness to community members, especially to individuals who are more likely to have a difficult time understanding what is available. This participant felt that increasing awareness of such services will encourage more individuals to learn about what is out there to improve their mental well-being.

Different Methods of Outreach

One participant mentioned that another possible way to reach out to community members is to conduct several different methods of outreach. One participant stated:

Maybe by calling like through the phone. I think they'll do like house calls, not like go but just talk to them over the phone or, and if they need to like speak in person, just make appointments like when they are available, you know?

For instance, if only flyers are available, individuals who are unable to read might not benefit from such awareness. If outreach is done through technology or something that might require internet access, the requirement of technology might put some individuals at a disadvantage if they do not have the financial stability to purchase internet access or whatever technology being used. Having different ways that mental health agencies can increase such awareness to individuals will allow a greater number of community members to be motivated to reach out to services.

Expansion of Services

Another great suggestion that was brought up during the interview was the expansion of services available. Many participants emphasized the lack of services available in rural communities of Fresno County and may increase the difficulty in accessing services. Some individuals lack transportation or time to travel to different areas or cities to take advantage of such services. Due to this challenge, participants felt that individuals in the community do not take advantage of the mental health services offered and instead reject such services. This suggestion can be found below:

Yeah, so like the biggest thing I would do is have more offices because yeah. Like there's the one on [street name] and the one on [street name], but like that's about it with the County. I would place [services] around Fresno, especially like West Fresno and Southeast Fresno because of the fact like I said, people have to choose whether they're going to go out and make money to eat or whether they're going

to go have services. Yes, the bus is awesome, but it also takes two hours to get to places, you know? It's not practical at all. So, people are not going to go to like mental health services if it's out of their way.

Participants felt that if services are expanded, mental health agencies might be able to reach a wider range of individuals and increase the utilization of such mental health services.

Increase Providers Available

Increasing providers available in mental health agencies was another change one participant said he would make. He felt that providers have a large caseload of clients and due to the great demand, providers are overworked and may not provide effective services to individuals. As providers are being overworked, the participant stated that he felt clients were unable to spend a reasonable time with their providers and extended the time to build rapport with providers:

Making sure that therapists and everybody, obviously this is ideal, like they don't have like over hundreds of clients, you know, their case loads are so horrible and big that they can't give their clients enough time. Like what's the point in going in and talking for 25 minutes or 30 minutes, max?

This participant felt that by increasing the number of available providers and decreasing their caseload would not only benefit the providers, but the increase of available providers would also benefit clients. Clients would receive better care because the provider would have the time to pay greater attention to each client with a smaller caseload.

Educating Communities

The last suggestion participants said they would make is to educate community members about the services available in Fresno County. Participants mentioned that this

education should include explaining to individuals what mental health and its services are, what to expect in the process of receiving mental health services, its benefits, and explaining this topic to individuals at an earlier age. For instance, one participant mentioned that her experience motivated her to increase education on the topic:

I was an afterschool TA and I remember seeing a sticky note on a folder and it said, “Emily says she wants to kill herself” in a second-grade classroom. And so, you know, that's, I feel like that's something that also younger kids, like the kids need to be more informed about that. That it's okay to seek help when you need it.

Participants mentioned that by educating community members on this topic would possibly decrease the stigma on the topic and open their mind to the possibility of considering or receiving mental health services if ever necessary. Increasing the knowledge on this topic will help individuals become informed when deciding whether or not services will benefit them and decrease any misinformation on mental health.

Summary

This chapter presented the common themes and findings that emerged from the interviews with the participants. The themes included demographics, characteristics they look for in a provider, both discouraging and encouraging factors that influence their decision in seeking mental health services, alternative coping methods utilized, and the changes they would make to Fresno County’s services. These findings can be utilized to promote discussion among mental health agencies and establish ways to improve its services for community members.

CHAPTER 5: DISCUSSION

This chapter presents a discussion based on the findings of this study. The research study's findings will be tied back to the ecological systems theory, previous literature, significance of the study, the study's implications regarding practice, policy, and research, recommendations in future practice and research, and limitations of this study.

Summary of Findings and Linkage to Previous Literature

The research question explored factors affecting the utilization of mental health services by Latinas/os in Fresno. The themes emerging from the data included factors such as: provider characteristics, Latino culture, accessibility, the current services available, friends, escalation of symptoms, positive outcomes with mental health services, and alternative coping methods. Chapter 4 presented the common themes among the study's participants' responses. These findings included the characteristics that participants sought in their providers, which included preferred gender, ethnicity, and the ability to establish rapport. Additionally, both discouraging and encouraging factors for accessing mental health services were listed. Regarding discouraging factors, Latino culture, accessibility, and the current state of available services were identified to be concerns that dissuaded participants to utilize mental health services. On the other hand, factors that encouraged mental health service usage were: friends, escalation of symptoms, and positive outcomes. Lastly, the alternative coping methods participants utilize due to the lack of access to mental health services and the changes they would make to improve mental health services in Fresno County were presented.

Participants discussed how they preferred to choose their providers in regards to gender, ethnicity, and the mental health provider's ability to establish rapport. Research studies found that lack of representation among providers may be discouraging to

individuals when seeking help (Barrio et al., 2008). Participants in this study also discussed how certain characteristics of the provider allowed them to feel more comfortable when sharing their emotions or issues. For instance, the ability to choose a certain gender or ethnicity brought comfort and the feeling of being able to relate to their provider. However, other research found that representation among providers for some Latinas/os was not a significant consideration (Ishikawa et al., 2010; Kouyoumdjian et al., 2003). These findings differed with the current study's findings where this study's participants preferred to have a choice in their mental health care provider's qualities.

Latino culture was another significant finding from this study. This study found that some elements of the Latino culture, such as family members, machismo, or religion, discouraged individuals from receiving mental health care. Regarding family, participants in this study mentioned that family members discouraged participants to receive mental health services due to commenting that services were "stupid" or participants would be perceived as "crazy." This finding was found to be similar to other research studies. Participants in other studies considered a family's opinion when deciding whether or not to seek mental health treatment (Ishikawa et al., 2010). Regarding machismo, participants in this study indicated that males suffered from feelings of shame and embarrassment when considering to receive mental health services. Again, this finding was similar to previous research studies. Kalkbrenner and Neukrug (2018) found that Latino men felt that their feelings of shame and embarrassment were barriers to initiating mental health services. The last factor that discouraged mental health service usage involving the Latino culture was religion. The study's participants reported that religion was a method of finding solutions to life's problems. Spirituality and religious beliefs can be considered factors that discourage the use of mental health services as an alternate method of receiving support (Kouyoumdjian et al., 2003; Turner & Llamas, 2017). When examining

factors from the Latino culture that can potentially discourage mental health service usage, these issues were consistent with the findings of other research studies.

Another issue that discouraged mental health service usage was accessibility, which included responses relating to location, time, and cost. The location of the mental health services was discouraging for the participants because mental health agencies were located in areas that lacked public transportation. Even if public transportation was available, it was impractical as the use of public transportation was time-consuming. One research study indicated location as limiting access to mental health services (Dinwiddie et al., 2013). Conversely, other research studies indicated that location was not a primary concern (Kaltman et al., 2014). For the participants in Fresno County, location and time were identified as barriers. Participants mentioned that they did not have enough time to seek mental health services because priorities such as school, work, or their children were more important. Other studies reported that they did not have time to schedule in mental health services due to their work schedules (Kaltman et al., 2014).

The last reported response that affected participants' accessibility of mental health services was cost. Other studies have had conflicting outcomes regarding socioeconomic factors. Some individuals in other studies have mentioned that services were costly and were not able to afford mental health services (Kaltman et al., 2014; Kouyoumdjian et al., 2003; Rastogi et al., 2012). Interestingly, other studies reported that those who lived in poverty were more likely to utilize mental health services (Cho et al., 2014; Lee & Matejkowski, 2012). Participants' responses to the cost of mental health services in this study, however, were more consistent with the former research studies that indicated services to be expensive. Mental health services should not be considered a luxury that only those with high socioeconomic backgrounds should be able to afford. Determining ways in which services can be accessible to individuals, regardless of their socioeconomic status, may be essential in increasing mental health service usage. For the

most part, the findings in this study are found to be consistent with the results in other literature. The findings give insight to the individuals living in Fresno County and an indication as to what research studies to focus on.

The other significant factor that was reported to be discouraging when accessing mental health services was due to the current services' availability. This means that the current services available were discouraging as they would lack in making community members aware of the mental health services available and have had prior negative experiences with those services. Just like previous studies, participants in this study stated that the lack of awareness of mental health services influenced them to not seek mental health services. Participants felt unmotivated and unsure as to how to access the services. This finding was similar to other literature in that the lack of awareness was seen as a barrier when utilizing mental health services (Ayón, 2013; Barrio et al., 2008; Ingram et al., 2015; Martinez et al., 2016). Participants' prior negative experiences with mental health services was another factor that had similarities to other literature as well. Other research has shown that underutilization of mental health services was due to previous experience with lower-quality mental health care (Alergria et al., 2002). Participants in this study indicated, just like participants in other studies, that negative interactions with workers in the mental health field impacted the utilization of mental health services. Although the findings in this study have been found to be similar to other literature, these findings may have been able to confirm that those discouraging factors may be generalizable to individuals in Fresno County.

The participants' encouraging factors to utilize mental health services included friends. Participants in this study mentioned that friends encouraged them to seek mental health services. They were found to motivate participants to give mental health services an opportunity and were a support system for them. Other research seemed to focus on family as a factor rather than friends. The available research seemed to lack in providing

information as to whether or not friends are found to be a significant factor to affect the utilization of mental health services. While other research has not been found to be similar or different to the findings in this study regarding friends, the finding shows that friends may be a significant factor to encourage individuals to seek mental health services in Fresno County. In addition, learning about this finding may provide a significant contribution to the literature on the factors impacting mental health service usage among Latinas/os.

Another encouraging factor that participants reported that influenced them to utilize mental health services was their escalation of symptoms. Participants reported symptoms relating to depression, anxiety, and stress. Due to these symptoms affecting their daily functioning, the participants stated that the worsening of these symptoms influenced them to utilize mental health services. In other studies, participants reported similar findings. Previous studies have found that when participants reported poorer mental health, then they were more likely to utilize mental health services (Cook et al., 2017; Kim et al., 2010). This finding may assist mental health agencies in determining how individuals view their mental health and figuring out if treatment is necessary. Doing so in Fresno County will help community members to determine if they should seek mental health services.

Positive outcomes from previous mental health services was an encouraging factor for individuals to continue to seek services. For instance, participants in this study mentioned that they have had prior positive experience or improvement in their symptoms to influence their continuation of mental health services. When referring to the positive experiences that participants reported, they were mostly about the interactions with the mental health care provider. They indicated that they found their provider to be trustworthy and skillful in building rapport with them. Similar to this finding, positive client-therapist interactions were found to provide effective mental health services to

participants in other studies (Ishikawa et al., 2010; Kouyoumdjian et al., 2003). These interactions encouraged individuals to continue to seek mental health services, just like the improvement of their symptoms. In this study, participants mentioned that they started to feel better and had started to develop an improvement in their outlook of life. Again, other studies were shown to be consistent with this finding. Other studies suggested that if individuals had positive experiences with mental health services, then they found services to be more helpful and would continue to use services (Ishikawa et al., 2010). The findings in this study have given a perspective to the participants' encouraging factors in Fresno County. The study's findings were similar to the findings of other previous research literature.

The study's participants revealed positive and negative coping methods that replaced the utilization of mental health services which included substance use and meditation and deep breathing. A couple of participants mentioned the use of marijuana as a way to cope with feelings of anxiety. Another participant practiced meditation and deep breathing that she learned from an app on her phone. Currently, there is limited research on alternative ways individuals may cope with their mental health when not utilizing mental health services. This study, however, gives little insight into the potential alternative means by which to cope with challenges and difficulties.

The other important findings, which relate to the changes that participants would suggest to the mental health services offered in Fresno County, were stated in this study. The recommended changes included: increase diversity and cultural training, increase awareness, provide different methods of outreach, expand services, increase providers available, and educate community members about mental health care, its process, benefits, and what to expect. Again, there was limited research as to what changes participants in other studies would make to improve mental health service delivery. As

other research studies were limited in exploring this topic, the findings for this study are significant in providing new information for the mental health services in Fresno County.

Ecological Systems Theory

This study took into consideration the ecological systems theory, which was previously mentioned in Chapter 2, and related its theory to the findings shown in this study. This theory focused on the implementation of different levels, micro, mezzo, and macro, and how they interconnected with one another.

At the micro level, findings indicated how factors, such as family members, were an immediate influence when trying to utilize mental health services. This finding showed how at the immediate level, individuals are deemed to have some sort of factor to impact how they decide whether or not to utilize mental health services. For instance, family members may directly or indirectly affect a person's utilization of mental health services. Directly, someone in the family with the ability to provide transportation may not want to give another family member transportation to receive mental health services. Indirectly, a family member may not be able to provide financial support to one another and may limit a person's access to mental health services. This information is important as the ecological systems theory helps others to recognize ways to assess how to assist individuals who are impacted at the micro level.

At the mezzo level, factors such as religion and friends can be found to affect individuals and how factors can impact their utilization of mental health services. Distinguishing how factors at the mezzo level, in addition to the factors at the micro level, can influence individuals may provide insight into the external factors affecting the individual past the micro level. For instance, religion may offer a person with a safe space or alternative way to seek solutions for their mental well-being. Friends, too, may be a support system for individuals and depending on the friends, may negatively or

positively influence a person to access mental health services. Mental health agencies may better assist individuals to recognize protective factors and utilizing mental health services on another level other than the micro level.

The macro level, which is the outer level that also indirectly influences individuals, is found in this study to be factors such as culture and health insurance. These factors are important as well as they help providers in mental health agencies to realize how indirect factors may affect clients. Policy changes, the cultures people grow up in, or even regulations around health insurance and its limitations are important to consider. Culture is another macro-level aspect that may affect individuals. For instance, the expectations held for males in the Latino culture is to not access services, but instead to hold their feelings inside. Machismo in the culture, unfortunately, supports the stigma involving males and their emotions. Keeping an open mind about the many ways that clients may be indirectly affected can provide mental health providers with the ability to reduce biases and view their clients' circumstances from different perspectives. Examining factors at all three levels that may affect individuals is important as the different system levels helps to keep an open perspective on the different elements that may be affecting the utilization of mental health services.

Significance of Study

This study not only contributed to the literature available on Latinas/os and mental health, but this study may also benefit providers in the mental health field by considering ways to improve mental health service delivery and increase its usage for Latinas/os. Additionally, this study may add to the research available regarding mental health services and by focusing on participants from Fresno County. Focusing on the Fresno County community is important as there is scant literature available for that area. Furthermore, this study found to have many similarities to other research literature

available. Although similar to other studies' findings, this study may show its significance to Fresno County and its community members. The study's findings gave insight as to what some young adults find to be successful in the mental health field and what is lacking in regards to mental health services. In addition to the participants' input, this study was able to give providers in the mental health field an idea as to what prospective clients may look for, such as the encouraging factors mentioned previously. Providers may then consider these participants' responses, such as assessing for escalation of symptoms or focusing on providing positive experiences to clients, and incorporating them in their practice. In other words, this study was significant as its findings contribute to the current literature and give new perspectives regarding the improvement of services and its delivery to clients. Additionally, this study provides potential implications for practice, policy, and research, as well as recommendations for future practice and research.

Implications to Practice

This study provided cultural considerations and perspectives in regard to implications for social work in the mental health field to further improve services and its delivery. Mental health agencies could consider expanding their services to rural communities, increasing education on the topic of mental health to community members, or mandating cultural training for its staff members. Incorporating these changes from the findings of this study may allow providers to become more culturally sensitive and open to accepting new and different perspectives from clients. For instance, one of the recommendations is developing an understanding of machismo and how that cultural value may affect prospective male clients. Providers may actively consider their clients' experiences and utilize that information to find ways to improve service delivery with those clients.

Giving mental health providers information to improve mental health service delivery also relates to the social work values and ethical principles. This study emphasizes the importance of cultural competency, which relates to social work ethical values (National Association of Social Work [NASW], 2017). For instance, being able to understand and communicate with individuals may help providers to better assist clients. Improving client-therapist interactions give providers a way to improve service delivery while also keeping in mind the social work values necessary for an ethical practice.

Policy Implications

This study may be useful in advocating for changes in current policies available. For instance, after learning how one participant deals with the struggle of paperwork and the issue around his legal name, implementing changes to help facilitate the paperwork process can assist clients in feeling more comfortable in requesting and receiving mental health services. In addition, these findings may provide insight into barriers in health insurance. This may include those who lack health insurance coverage or even those who have difficulty in accessing such benefits. This study may provide mental health agencies with ideas that promote an easier process for clients to access mental health services.

Furthermore, implications to policies may be viewed from the lens of social work values. For example, providers may be able to challenge social injustice and advocate for individuals to receive resources, information, and an equal opportunity to mental health services (NASW, 2017) as certain policies may be the reason why individuals are unable to access mental health services. The findings in this study may help providers to recognize such barriers and support the changes that are needed to improve mental health services.

Research Implications

Finally, future research should consider individuals' perspectives from other areas such as different locations of the Central Valley, different ethnicities, cultures, or even age groups. Modifying this study to focus on other areas may provide even more significant findings that will overall give new ideas to the improvement of services.

Implications of research may additionally be utilized to develop social workers' competence. For instance, providers may build on their knowledge while incorporating different perspectives in future research (NASW, 2017). Results in later research may give providers an alternative way of learning professional knowledge and how to apply skills in the mental health field (NASW, 2017). This relates back to social work values and what is necessary for improving future research and their findings.

Recommendations for Future Practice and Research

Based on this study and its findings, future practice should take into consideration the many responses that participants have given. This includes incorporating the participants' opinions on mental health to modify any necessary changes in mental health agencies and increase utilization and effectiveness among service delivery. For instance, focusing on the factors that encourage individuals to participate in mental health services should be seen as something that is being effective and continued in service delivery.

After finding what factors have discouraged mental health service usage, mental health agencies may take these responses into consideration when focusing on what needs to be improved in service delivery. Mental health agencies may utilize this information to modify the ways they approach mental health care for individuals. For instance, mental health care agencies can attempt to diversify their staff to increase representation for clients. Doing so will help prospective clients relate to the providers and find mental health care more helpful. Additionally, mental health agencies can take into consideration Latino culture and rather than finding that as a barrier, assist clients in incorporating their

culture into the services. This may validate a client while also providing the mental health care provider with a better understanding of the client's background. Mental health agencies may also incorporate the information found regarding accessibility and the current services available. They can take these into consideration to expand on services, find resources for clients to help with costs of services, or even find ways to increase appointment times that do not conflict with a person's schedule. All of these various modifications to service delivery may ultimately increase the usage of mental health services.

Regarding encouraging factors reported in this study, mental health agencies may realize what is considered effective for individuals. For instance, after participants have mentioned that escalation of symptoms, prior positive experiences with mental health services, and improvement in symptoms have all been found to encourage individuals to seek services, mental health agencies may recognize that these findings should be continued in service delivery. Now friends, although a unique finding in this study, this finding may still be utilized by mental health agencies as well. For instance, mental health agencies may be able to promote awareness of the importance of having close support systems. Doing so may allow individuals to seek mental health treatment whenever necessary.

Another recommendation that should be considered is that providers should develop alternative coping methods as it may help individuals utilize informal mental health services. Mental health providers may spread awareness of inexpensive methods that individuals can use to cope. These therapeutic ways may be introduced to the community for those who are unable to access mental health services. Although these alternative coping methods may not be considered formal mental health services, these coping methods are still useful as they may help individuals cope with feelings of depression, anxiety, or stress, as reported in this study.

Most importantly, the changes that participants stated they would make to the mental health services in Fresno County is another entity to consider. As these recommendations come from the participants themselves, mental health agencies may be able to organize ways to implement those changes. Hearing firsthand from individuals as to what they think might make services more effective may assist agencies and their providers to help various community members. Rather than deciding what would be the most effective, utilizing the information from community members themselves may probably be best.

Regarding future research, assessing the opinions of other individuals who have had experience with or considered to participate in mental health services is important. For instance, gathering input from minors, elders, or another subset of adults may help guide mental health agencies in promoting and creating more effective services for individuals to use. In addition, other areas in the Central Valley should be assessed. Learning about different counties other than Fresno County will help future researchers gain more insight into various areas in the Central Valley. Generating more data on this matter may promote enhanced service delivery among many different mental health agencies in several areas in the Central Valley. Ultimately, creating an improved welcoming and safe environment for those suffering from mental health issues may soon be the reality that individuals look for.

Limitations

Research limitations were found in this study. One limitation was not being able to interview individuals under the age of 18, and thus this study's findings cannot be generalized for the Latina/o minor population in the Central Valley. Unfortunately, identifying individuals who were under the age of 18 that would be eligible to participate in the study was difficult. Due to the sampling methods that were used for this study, it

was unlikely that individuals under the age of 18 would have been aware of this study. Additionally, those under the age of 18 have not reached the legal age to consent in participating in a research study. The inclusion of participants under the age of 18 is challenging and should be considered for future studies.

Another limitation of this study is that the study's findings are not generalizable. Choosing a non-probability sampling method has made this study not generalizable because not everyone had an equal opportunity to participate in this study. Instead, this study focused on purposeful and snowball sampling methods because of the lack of resources available. The participants in this study happened to be all young adults so generalizing the findings to those who do not identify as young adults is difficult. Nevertheless, the findings from this study may still develop important insight into the factors that affect the utilization of mental health services for some Latinas/os in the Central Valley.

Regardless of the study's limitations, this study provided the first step in assessing factors that may increase mental health service utilization among Latinas/os in Fresno County. Mental health agencies and their providers may find the study's findings to be valuable in improving and modifying service delivery for the benefit of the community and for their mental well-being.

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APPENDICES

APPENDIX A: CONSENT FORM

Informed Consent
Department of Social Work Education
California State University, Fresno

You are invited to participate in a research study that is looking at factors that affect Latinas/os' use of mental health services. I hope that this study will help social workers and other mental health professionals have a better understanding of the experience Latinas/os face while trying to pursue mental health services. This research study will be conducted under the supervision of Dr. Dheeshana Jayasundara. The purpose of this study is to examine any factors that may increase or decrease the use of mental health services among Latinas/os.

Your participation in this research project is voluntary. You may withdraw from participating in this research project at any time. You have the right to end the interview at any point, even after signing and giving consent to participate in this research study. You may skip any questions you wish not to answer. By choosing not to participate you will not receive any penalties from the University or the Department of Social Work Education.

Your participation in this research project is confidential. If you wish, a pseudonym will be used to protect your identity. Your name will not be written in any documents except a participant's key. This key will be stored in a computer that is password protected. This interview will be audio recorded. The answers provided will then be transcribed to analyze the results by the researcher. The audio recordings and the transcribed documents will be stored in a computer that is password protected in efforts to maintain confidentiality at all times. Once the study is completed, all data will be destroyed.

The researcher does not anticipate any risks from involvement in this study. In addition to your time, you may find some questions to be sensitive and difficult to answer. Some questions may cause emotional discomfort; you may stop at any time. You may have no direct benefit from participating in this study, however, your participation will help me better understand the magnitude of the problem. This information will also increase knowledge about this specific population.

If you have any questions about this study, please feel free to contact Dr. Dheeshana Jayasundara via email at djayasundara@mail.fresnostate.edu.

Date

Signature of Participant

Date

Signature of Researcher

APPENDIX B: INTERVIEW GUIDE

Part 1

1. Age:
2. Gender:
 - Female
 - Male
 - Other (please specify)
4. Level of Education:
 - High school diploma or equivalent
 - Associate degree
 - Bachelor's degree
 - Master's degree
 - Doctorate degree
 - Other (please specify)
5. Employment status:
 - Part-time student
 - Full-time student
 - Part-time employee
 - Full-time employee
 - Other (please specify)
6. Relationship status:
 - Single
 - In a relationship
 - Engaged
 - Married
 - Divorced
 - Widowed
 - Other (please specify)
7. Household income:
 - \$0-\$9,999
 - \$10,000-\$19,999
 - \$20,000-\$29,999
 - \$30,000-\$39,999
 - \$40,000-\$49,999+

Part 2

1. What does “mental health” mean to you?
2. What does “mental health services” mean to you?
3. What does “therapist” mean to you?
4. What does “counselor” mean to you?
5. What does “social worker” mean to you?
6. What does “psychologist” mean to you?
7. For what reasons do you think someone would seek mental health services?
8. How would you describe your experience with mental health professionals?
9. If applicable, what factors did you consider when choosing your mental health services?
10. If applicable, how would you describe your experience of receiving mental health services?
11. What factors have discouraged you, if any, to go out and seek mental health services?
12. What factors have encouraged you, if any, to go out and seek mental health services?
13. What factors have discouraged you, if any, to keep receiving mental health services?
14. What factors have encouraged you, if any, to keep receiving mental health services?
15. Do you think there is any cultural or social stigma about receiving mental health services among Latinas/os? Why or why not?
16. Do you feel that mental health services are viewed the same for every culture? Why or why not?
17. How satisfied are you with the mental health services available in Fresno County?
18. If you could implement changes to the mental health services offered in Fresno County, what sort of changes would you implement?
19. Is there anything else that you would like to share regarding your experience with mental health services that you have not been able to disclose?

APPENDIX C: RECRUITING FLYER

I NEED PARTICIPANTS FOR MY THESIS STUDY!

My research focuses on the factors that influence or discourage Latinas/os from seeking mental health services in Fresno County. Currently, I need individuals who have received any sort of mental health services (i.e. therapy, counseling, etc.) in Fresno County who I can interview. To qualify for my thesis you would have to:

- Be 18 years or older
- Identify as Latina/o
- Received services in Fresno County

If you're interested or have any questions, please message me! Or if you know anyone who is willing to participate, please send them my way!

Thank you! ☺