

Racial and Ethnic Differences in Pathways to Care, Diagnosis, and Disposition Among Youth in a Multi-Channel Psychiatric Emergency Services Program

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BACKGROUND:

- Psychiatric emergency department (ED) visits among youth have been rising; these rises are disproportionately driven by youth of color
- Limited research on health equity in psychiatric emergency services

OBJECTIVE:

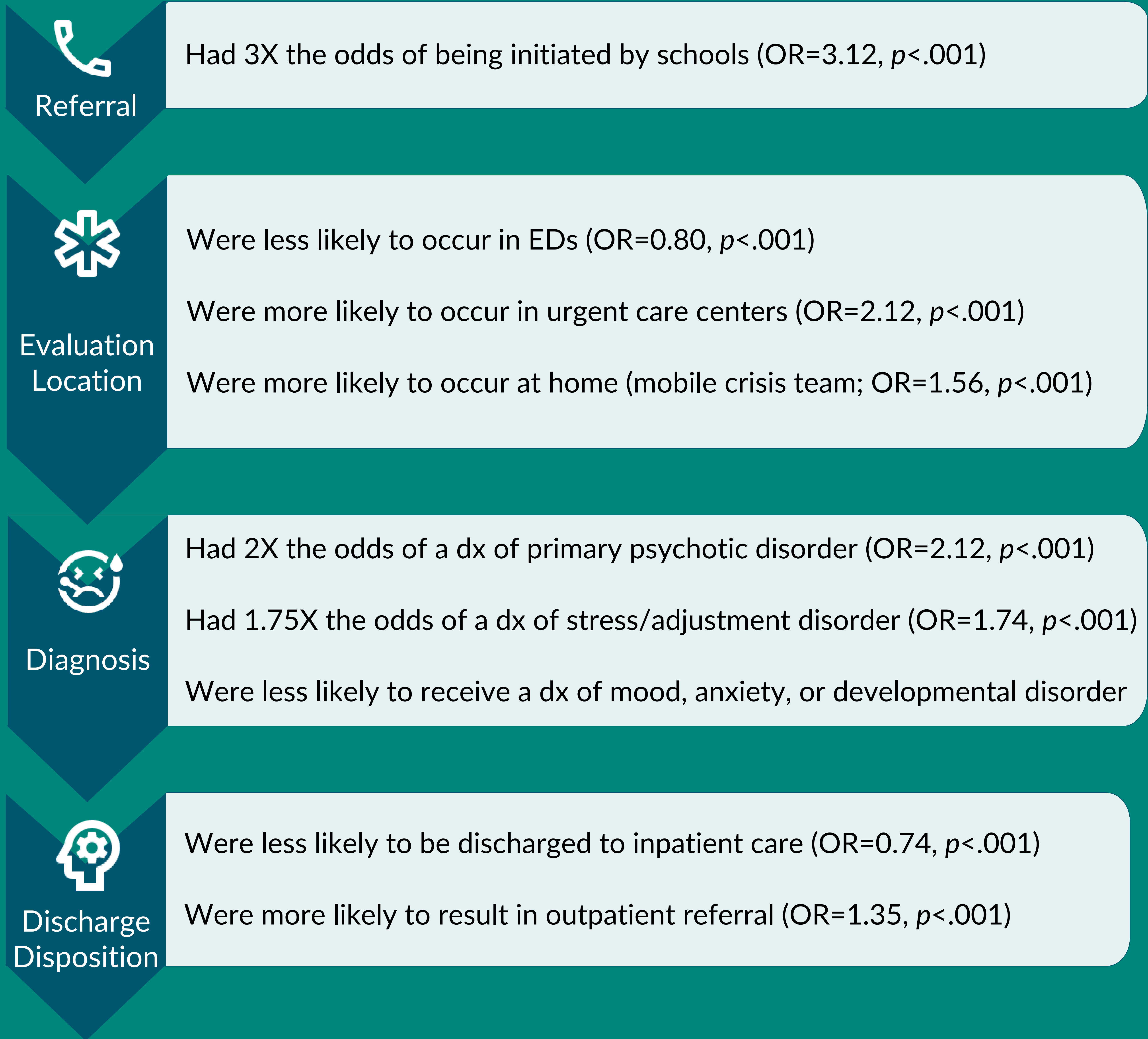
- We examined racial and ethnic differences in referral source, evaluation location, diagnosis, and discharge disposition

METHODS:

- Data Source:** Electronic health records from **26,511 encounters** among clients ages 21 and below at an urban, multi-channel psychiatric emergency services program in the Northeastern US, September 2017- August 2021
- Analysis:** Logistic regression models controlling for sociodemographic covariates and encounter characteristics



As compared with non-Latino White youth,
Psychiatric emergency encounters involving youth of color:



RESULTS:

Encounter Demographics	
Age	
0-5 years	1.6%
6-10 years	17.6%
11-15 years	40.7%
16-20 years	40.1%
Gender	
Male	49.7%
Female	47.7%
Transgender/Non-Binary	2.4%
Race	
Non-Latino Black	37.4%
Hispanic	33.7%
Non-Latino White	20.8%
Other	8.2%
Public Insurance	87.0%
Diagnosis	
Stress/adjustment disorder	45.9%
Mood disorder	25.4%
Childhood onset disorder	10.1%
Developmental disorder	5.9%
Primary psychotic disorder	5.9%
Anxiety disorder	4.3%
Other psychiatric disorder	2.6%

DISCUSSION:

- Schools disproportionately refer youth of color, resulting in lost learning time
- Unlike in prior studies, youth of color in our sample were less likely to use the ED and more likely to use urgent care and mobile crisis options
- Youth of color may be referred for non-emergent issues which are better served with outpatient services

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