

Journal Articles

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Title: Ethnic diversity and pathways to care for a first episode of psychosis in Ontario

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Key Messages:

Objective: To examine ethnic variations in the pathways to care for persons accessing early intervention (EI) services in Ontario. **Method:** The pathways to care and the duration of untreated psychosis were assessed for first-episode psychosis patients who entered specialized EI services in Ontario. The sample was assigned to the following ethnic classifications: the White (Caucasian), Black (African descent), and Asian (ancestry from the continent) groups, plus all the “other ethnicities” group. **Results:** There were 200 participants: 78% were male; 61% from the White, 15% Black, 13% Asian, and 11% were from the other ethnicities group. At the first point of contact, more participants used nonmedical contacts (12%), such as clergy and naturopathic healers, than psychologists (8%) or psychiatrists (7%). There were no ethnic differences for duration of untreated psychosis (median 22 weeks) or for initiation of help seeking by family/friends (53%), police (15%), or self (33%). After adjusting for relevant clinical and demographic factors, the Asian and other ethnicities groups were 4 and 3 times (respectively) more likely than the White or Black groups ($P = .017$) to use emergency room services as the first point of contact in the pathways to care. Participants from the Asian group experienced less involuntary hospitalizations ($P = .023$) than all the other groups. Yet overall, there were many more similarities than significant differences in the pathways to care. **Conclusion:** EI services should monitor the pathways to care for young people of diverse ethnic backgrounds to address any disparities in accessing care.

Key words: first-episode psychosis/pathways to care/
schizophrenia/schizophreniform/DUP/early intervention
in psychosis/help seeking