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Identifying children who have mental health problems commonly relies upon the perceptions of parents, teachers, and the youth themselves. However, the perception of mental health need across these three informants may be different. Cognizant of this problem, the authors compared inter-informant agreement between youth-parent, parent-teacher, and youth-teacher dyads to determine whether perceptions about the child's emotional and behavioral problems differed by race/ethnicity. Findings indicate that teachers exhibited more racial and ethnic bias than youth or parents; parents were frequently unable to gauge whether the child had internalizing or externalizing problems; and generational differences between immigrant parents and their children may affect informant responses.

This study involved adolescents ( $N = 600$ ) who were an average age of 14 years ( $M = 14.9$ ;  $SD = 2.2$ ), and had received services within the year from one or more child-serving agencies (e.g., mental health, juvenile justice, child welfare, alcohol and drug rehabilitation, special education). Most youth were Caucasian (42%); followed by Hispanic (27%); African American (23%), and Asian Pacific Islander (8%). Over half (67%) of the sample was male. Over half of Asian Pacific Islander (61%) and Hispanic (59%) families had immigrated to the United States. The authors analyzed scores from the parent, teacher, and youth versions of the Child Behavior Checklist and controlled for age, gender, and family income.

Results indicate that no racial or ethnic bias significantly affected youth self-reports. However, teacher responses suggested the presence of bias in their perceptions, such that they associated *externalizing* behaviors with African-American youth (especially males). The perception that African-American youth have greater externalizing problems than their Caucasian peers "may partially account for [African American] overrepresentation" in the special education (p. 152) and juvenile justice sectors (p. 154). Teachers also characterized Asian/Pacific Islander youth with more *internalizing* than externalizing problems.

Results further suggest that parents frequently over- or under-estimated their child's need for mental health services. Caucasian parents reported *more* problems, and minority parents reported *fewer* problems than their children endorsed. Agreement between the youth and parent was higher for Caucasian than for Hispanic and Asian Pacific Islanders. The authors suggest that internalizing and externalizing problems may manifest differently in the classroom than they do in the home, possibly explaining discrepancies among respondent endorsements of internalizing and externalizing behaviors. For example, in contrast to teacher endorsements, African-American parents often reported internalizing problems in their children. Also, parents who immigrated to the United States and who "shoulder the burden" (p. 152) of immigration and discrimination may have difficulty identifying emotional and behavioral problems in their more acclimated children. Additionally, in an attempt to conform to competing cultural norms, youth from immigrant families might shield their parents from their emotional and behavioral problems.

In conclusion, parents and teachers are often key informants about the emotional and behavioral problems exhibited by youth; their responses and perceptions are often affected by their own ideas about what constitutes a mental health need. As discussed in their literature review, the authors assert that cross-cultural assessments with multiple respondents may also suffer from cultural, linguistic, and conceptual differences between respondents. The combined use of multiple respondents and culturally competent measures may reduce the instances of racial and ethnic discrepancies among informants. A previous cross-cultural study of parental beliefs about the causes of mental health problems (see *Data Trends* #101), and a study comparing parent, teacher, and youth self-reports on desired outcomes (see *Data Trends* #102) add support to the results of the current study.