Patterns and Predictors of Dropout from Mental Health Treatment in an Asian Population
Vathsala Sagayadevan, 1 BSc, Mythily Subramaniam, 2 MBBS, MHSM, Edimansyah Abdin, 3 PhD, Janhavi Ajit Vaingankar, 4 MSc, Siow Ann Chong, 5 MBBS, M Med, MD

Abstract

Introduction: Studies examining mental health treatment dropout have primarily focused on Western populations and less so on Asian samples. The current study explored the prevalence and correlates of mental health treatment dropout across the various healthcare sectors in Singapore. Materials and Methods: Data was utilised from the Singapore Mental Health Study (SMHS), a cross-sectional epidemiological survey conducted among an adult population (n = 6616) aged 18 years and above. Statistical analyses were done on a subsample of respondents (n = 55) who had sought treatment from the various treatment providers (i.e. mental health, medical, social services and religious healers) in the past 12 months. The World Mental Health (WMH) Composite International Diagnostic Interview version 3.0 (CIDI 3.0) was used to determine diagnoses of mental disorders, chronic medical disorders and service utilisation. Results: Of those who had received treatment, 37.6% had ended treatment prematurely, 23.2% had completed treatment and 39.2% were still in treatment. The religious and spiritual sector (83.1%) had the highest dropout, followed by the general medical sector (34.6%), mental health services sector (33.9%) and the social services sector (30%). Marital status emerged as the only sociodemographic factor that significantly predicted treatment dropout—with those who were married being significantly less likely to drop out than those who were single. Conclusion: The overall dropout rate across the various healthcare sectors was comparable to past studies. While the small sample size limits the generalisability of findings, the current study provides useful insight into treatment dropout in an Asian population.

Key words: Attrition, Mental illness, Service providers