pap201-10.3 The transition from child to adult care for youth suffering from depression

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Depression is one of the most common mental disorders, and the manifestation is often in adolescence (Kessler, 2005). In the Netherlands there is a strict distinction between child mental health services (18-) and adult mental health services (18 and older). Many young people with a depression have to navigate the transition; not only do they face all the developmental challenges of emerging adulthood, but they also have to deal with different services.

Substantial differences exist between the services for people with a depression: for example, there is a great reluctance to prescribe antidepressants to children, whereas medication is widely used for adults (Thapar, 2012). In addition, in psychotherapy the environment (parents, school) play a substantial role in child services, but treatment is very focused on the individual in adult services (McLaren, 2013).

There is a great need to improve the transition. Both child and adult mental health professionals express a need for a better cooperation between the two (Gerritsen et al., in press.), and studies both in the U.K. and in the Netherlands indicate that almost 60% of the children facing the transition do not continue in care (GGZ NL, 2015) – most likely leading to poor clinical outcomes (Singh et al., 2010).

The current project aims to improve the transition for young people suffering from a depression, by developing a transition protocol. The transition protocol is intended for both professionals and patients themselves and will be evidence and practice based. Young people, their significant others and professions are involved in developing the protocol. It will contain three parts: individual transition plan, coordination between professionals and parental involvement.

The protocol will be pilot tested and subsequently adjusted. We will present the first version of the protocol at the ECDP as well as explain the process and methodology of the development.