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## IMPROVING CHILD AND ADOLESCENT ADHERENCE TO EVIDENCE-BASED MENTAL HEALTH INTERVENTIONS

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**Introduction:** The exponential growth of evidence-based practice (EBP) interventions offers clinicians a growing number of empirically-supported psychosocial treatments for youth mental disorders. These interventions are likely to be ineffective with clients who drop out of treatment prematurely or who fail to adhere to the required intervention protocols. However, despite the critical role of client adherence, systematic evidence about strategies to support client adherence is lacking.

**Objectives:** The primary aim of this present study is to establish an empirical base for developing adjunctive adherence promoters to enhance client participation in psychosocial interventions.

**Methods:** Mental health child and adolescent intervention researchers who published RCT on three psychosocial interventions (CBT, IPT, Psycho-ed) were surveyed on type, use, and efficacy of intervention adherence promoters.

**Results:** Interventions included an average of 13.4 sessions ( $SD=7.8$ ) across 5 months. Most researchers reported using multiple adherence promoting interventions throughout their studies. On average, respondents reported using little more than one promoter per session and devoting approximately 12.4 minutes per session on all adherence promoters.

**Conclusions:** Results of this study will assist practitioners and researchers in improving adherence to psychiatric interventions for children and adolescents. Specifically, study results fill gaps in the literature on active efforts to sustain and increase client adherence to treatment for childhood and adolescent mental health disorders. Findings of this study support best practices for adherence promotion and open new avenues for research into the tailoring of adherence to EBP interventions for child and adolescent mental health problems.