PW01-200 - **ETHNIC DIFFERENCES AND SIMILARITIES IN TREATMENT OF COMMON MENTAL DISORDERS IN PRIMARY AND OUTPATIENT MENTAL HEALTH CARE IN THE NETHERLANDS**

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Objective: There are widespread concerns about the quality of mental health care for ethnic minority groups. This is supported mainly by studies from the U.S. and Great-Britain, raising doubts about the generalisability to (other) European countries. This study investigates ethnic differences in quality of care (QoC) for common mental disorders (CMD) in primary and outpatient mental health care in the Netherlands.

Methods: Data from electronic records of 89 primary care practices in 2007 (6,246 cases), and longitudinal data (2001 - 2005) from a nationwide psychiatric case register (17,270 cases). Quality of primary care indicators were 'detection of CMD', 'adequate follow-up', 'adequate prescription of psychotropics' and 'referral to specialised mental health care'. Outpatient mental health care indicators were 'waiting times', 'treatment intensity', 'early dropout' and 'early re-registration'.

Results: Compared with ethnic Dutch, quality of primary care was less for Turkish clients (CMD less likely to be detected) and Surinamese/Antillean clients (less than adequate prescription of psychotropics). Outpatient mental health treatment was less favourable for Moroccan and Turkish clients (longer waiting times and lower treatment intensity), but more favourable for Surinamese/Antillean clients (shorter waiting times and lower dropout).

Conclusions: The data do not provide sufficient support for a generalising statement that quality of CMD treatment is less favourable for ethnic minority clients. Though negative findings are not to be disregarded, positive findings - which may be related to the promotion of culturally sensitive care approaches in mainstream mental health services - deserve attention as well.

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