

Improving help-seeking for depression care in Nepal: Development and testing the feasibility, acceptability and appropriateness of a community-based intervention

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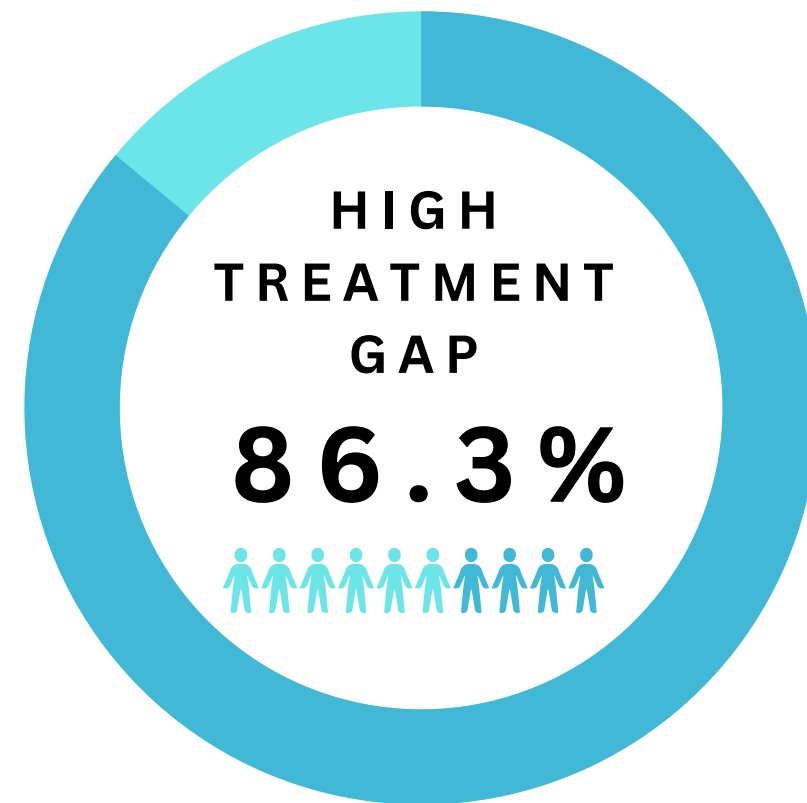
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PROBLEM AND THE STRATEGY

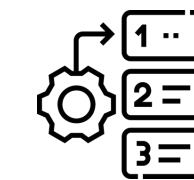


RESEARCH QUESTIONS

- What interventions effectively improve help-seeking attitudes and intentions among people with depression in LMICs?
- What are community stakeholders' perception of barriers to seeking mental health care and potential strategies to address those barriers?
- What intervention components are effective in improving help-seeking for mental health care?
- What is the feasibility, acceptability, and perceived benefits of a community-based intervention?



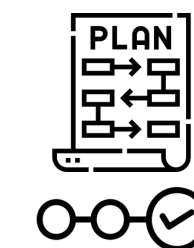
DEVELOPING A COMMUNITY-BASED INTERVENTION BY ENGAGING MULTIPLE STAKEHOLDERS



OPTIMIZING THE INTERVENTION USING THE MULTIPHASE OPTIMIZATION STRATEGY (MOST)

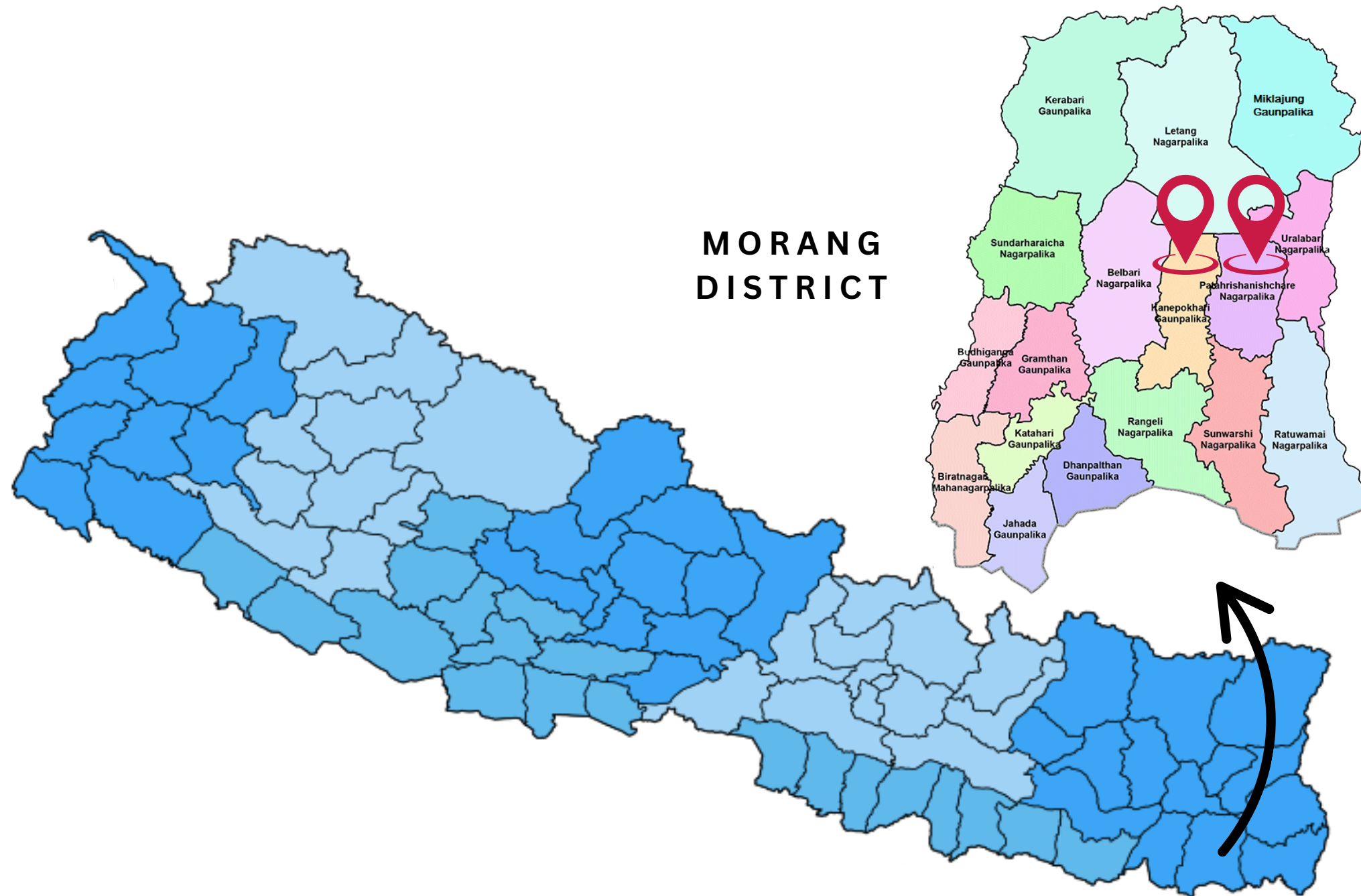


ASSESSING THE FEASIBILITY, ACCEPTABILITY AND BENEFITS OF THE INTERVENTION



DEVELOPING A PLAN FOR THE NEXT PHASE OF THE STUDY

STUDY SITES AND POPULATION

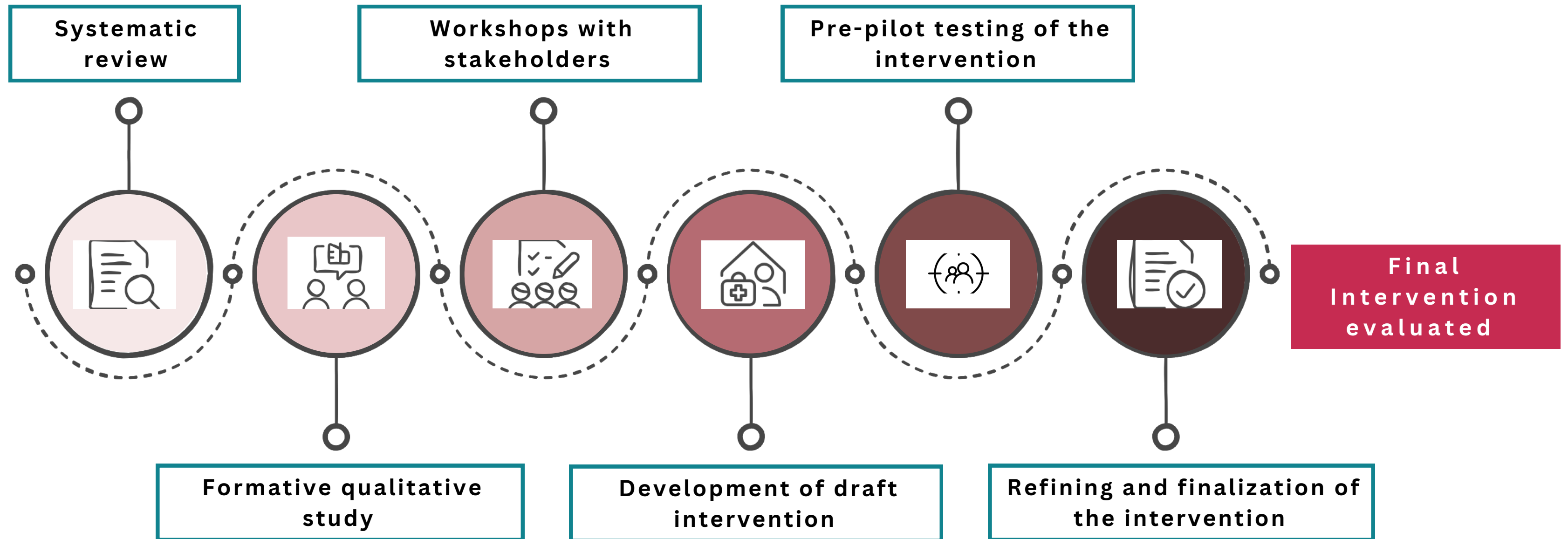


Study sites: Kanepokhari Rural Municipality and Patharisanishchare Municipality of Morang district in eastern Nepal

Target population: People with depression identified by trained Female Community Health Volunteer

Intervention implemented by: Female Community Health Volunteer (FCHV)

INTERVENTION DEVELOPMENT



OVERVIEW OF THE INTERVENTION

COMPONENT 1



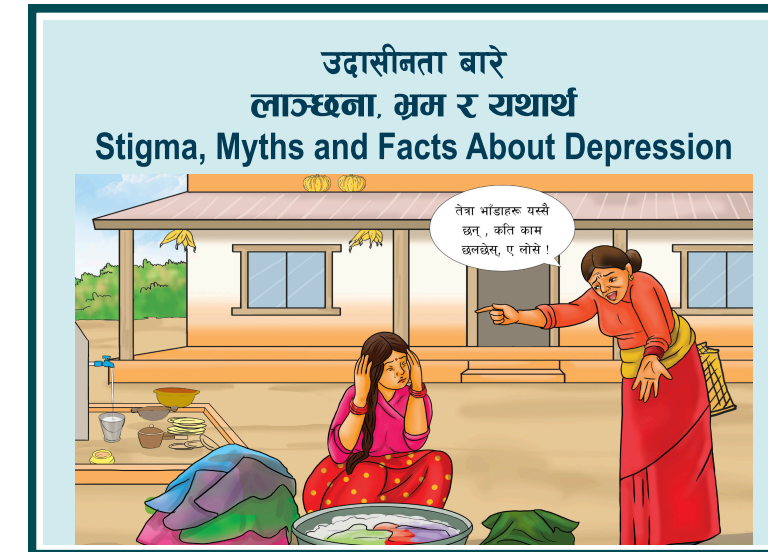
The aim of this component is to raise awareness about depression, with a particular focus on its causes, manifestations, and the potential negative consequences of untreated depression. This component is designed as a flipchart with animated images to engage participants.

COMPONENT 2



This component provides detailed information about the mental health services available. It includes types of services offered, costs, distance to service providers, and operating hours. This component is being produced as a booklet with images of specific health facilities and their surroundings.

COMPONENT 3



This component is developed to reduce stigma by dispelling myths, and providing accurate information about depression. It is designed as a wall calendar with animated images to enhance understanding, especially for participants with reading difficulties.

COMPONENT 4

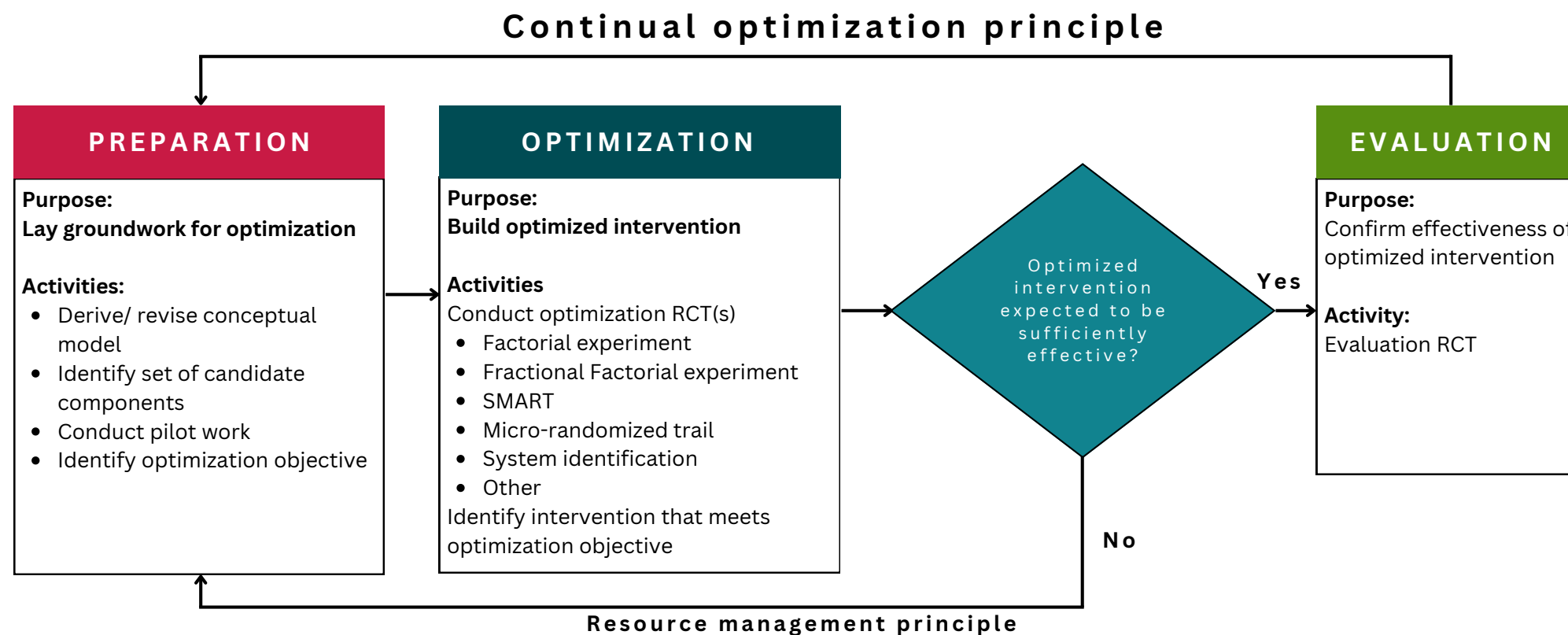


This component of the intervention showcases recovery stories of individuals who have triumphed over depression. This component comprises two 8-minute video stories featuring individuals who successfully recovered from depression. FCHVs show these videos on a tablet and discuss them briefly with each participant.

EVALUATION DESIGN

MULTIPHASE OPTIMIZATION STRATEGY (MOST)

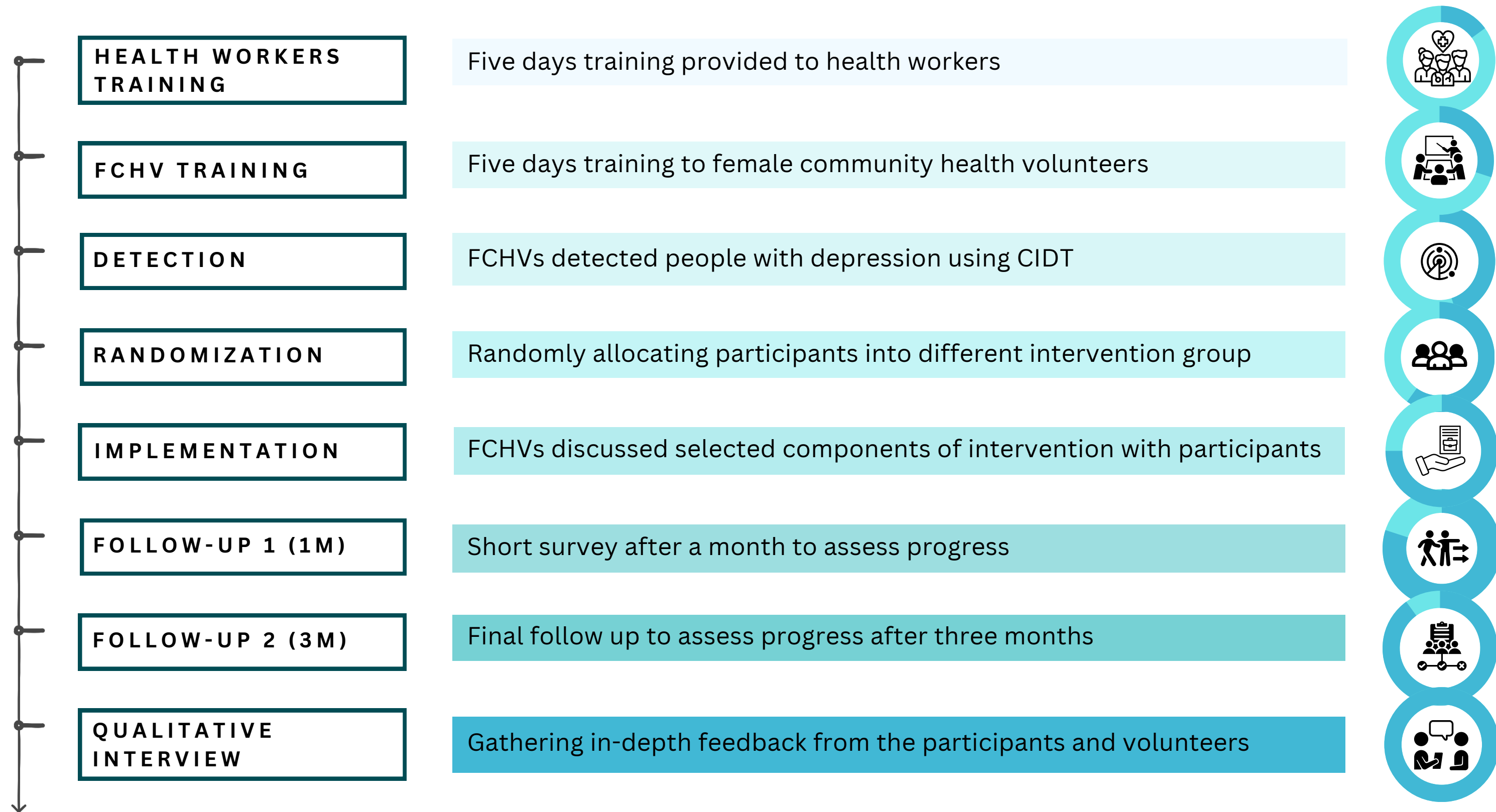
We utilized a Multiphase Optimization Strategy (MOST), an engineering-based approach to optimize the community-based intervention. MOST consists of three key phases: preparation, optimization, and evaluation. The current study focuses on the preparation and optimization phases. In the optimization phase, we employed a multifactorial design to conduct a randomized factorial experiment trial to evaluate the impact of four intervention components.



Randomization of participants across 8 experimental conditions

Experimental condition/groups	Psycho-education (candidate component)	Service information	Stigma reduction	Service user's video	Sample size to be determined
1	Yes	Yes	Yes	Yes	
2	Yes	Yes	Yes	No	
3	Yes	Yes	No	Yes	
4	Yes	Yes	No	No	
5	Yes	No	Yes	Yes	
6	Yes	No	Yes	No	
7	Yes	No	No	Yes	
8	Yes	No	No	No	

IMPLEMENTATION PROCESS



OUTPUTS

FCHV TRAINED

51 FEMALE COMMUNITY HEALTH VOLUNTEERS TRAINED ON CIDT AND COMMUNITY INTERVENTION

HEALTH WORKERS TRAINED

35 HEALTH WORKERS TRAINED ON MHGAP-IG

COMMUNITY INTERVENTION

INTERVENTION AND IMPLEMENTATION MATERIALS DEVELOPED

PEOPLE WITH DEPRESSION DETECTED

310 PEOPLE WITH DEPRESSION DETECTED BY FCHV USING CIDT

PEOPLE ATTENDING THE INTERVENTION

290 PEOPLE WITH DEPRESSION RECEIVED THE INTERVENTION

HIGH RISK PEOPLE RECEIVING SERVICE

17 PEOPLE WITH HIGH RISK OF SUICIDALITY RECEIVED SERVICES FROM COUNSELORS

PAPERS PUBLISHED

3 PAPERS SUBMITTED FOR PUBLICATION

IMPLEMENTATION TEAM

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