INCÓMODO: A MIXED-METHODS EXAMINATION OF PRIMARY CARE NURSES' EXPERIENCES MANAGING DEPRESSION IN RURAL GUATEMALA

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Background: Depressive disorders are the fourth-leading cause of years lost to disability in Guatemala(1) yet >75% of individuals with major depression are untreated(2). Only 3% of curricula for nurses is dedicated to the care of psychiatric conditions(3), despite a recent National Mental Health Policy that lists access to integrated mental health care within the primary care system as a priority(4).

Aims:

1) Describe the experience/comfort of primary care nurses in rural, indigenous Guatemala in identifying andtreating depression.
2) Identify resources/trainings which Guatemalan nurses would find meaningful and relevant to their work.

Methods: Guatemalan primary care nurses working for the non-profit Wuqu' Kawoq participated in a cross-sectional, mixed-methods survey (N=22) which asked about comfort/stress levels managing depression and two focus groups (N=16) which explored experiences/training requests. Qualitative data utilized a theoretical thematic analysis approach and descriptive statistics described Likert-Scale responses.

Results: Nurses identified contributors to depression: violence, machismo, and poverty. 68% of the nurses "always" or "sometimes" felt overwhelmed/stressed by the stories they hear from patients, and 33% gave a negative response to "how does caring for patients with depression make you feel?", often citing feelings of ineffectiveness. When given a 3-point Likert scale (uncomfortable/somewhat comfortable/comfortable), 33% were uncomfortable identifying and 18% were uncomfortable treating depression. Barriers to connecting their patients to specialized professionals included access, lack of trust and limited understanding of treatment potential. Respondents requested integration of mental health professionals onto the team, printed reference/education materials, and a train-the-trainer session which would equip them to speak to community leaders.

Discussion: Primary care nurses in rural, indigenous Guatemala are motivated to improve their communities' understanding of depression but feel unprepared to address this issue unilaterally without additional support. They were able to give concrete recommendations about meaningful and relevant trainings/materials which would improve their comfort.

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Learning Objectives

At the conclusion of this presentation, participants will be able to:

1. Examine the experience of primary care nurses in rural, indigenous Guatemala in identifying/treating depression.
2. Identify two resources/trainings which Guatemalan primary care nurses would find meaningful and relevant to their work.

References:

1. Institute for Health Metrics and Evaluation. Findings from the Global Burden of Disease Study 2017. Seattle, WA; 2018.
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