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INTRODUCTION

The prevalence of major depressive disorder (MDD) among adolescents aged 10–19 years old is 19% globally (Shorey et al. 2022). There is growing global interest in early detection and engagement with care for adolescents experiencing depression. However, there is limited information on perceived barriers and facilitators to engagement with adolescent mental health care in low- and middle-income countries (Wahid et al. 2020). Accordingly, this study examined perceived barriers and facilitators to the identification of depression in adolescents in Brazil, Nepal, and Nigeria.

METHODS

Key informant interviews (n = 153) and focus group discussions (n = 31) were conducted in Brazil, Nepal, and Nigeria with adolescents, parents, health care workers, social workers, teachers, and other stakeholders to explore perceived barriers to identifying depression in adolescents. This study employed a deductive theory-informed codebook enhanced with inductive codes and analyzed using constant comparison by a team of 8 multi-site researchers. The framework approach (Gale et al. 2013) was used to construct overarching themes and to synthesize a theoretical model.

RESULTS

Stigma and a lack of knowledge about the signs and symptoms of depression were perceived as major barriers to the identification of depression across all three settings. Three other themes emerged:(1) role of stakeholders in identifying depression, (2) training or education as a facilitator to identifying depression, and, (3) the role of technology as barrier or facilitator depending on its specific application. Teachers and parents were the primary stakeholders identified as being able to recognize early signs and symptoms of depression in adolescents.

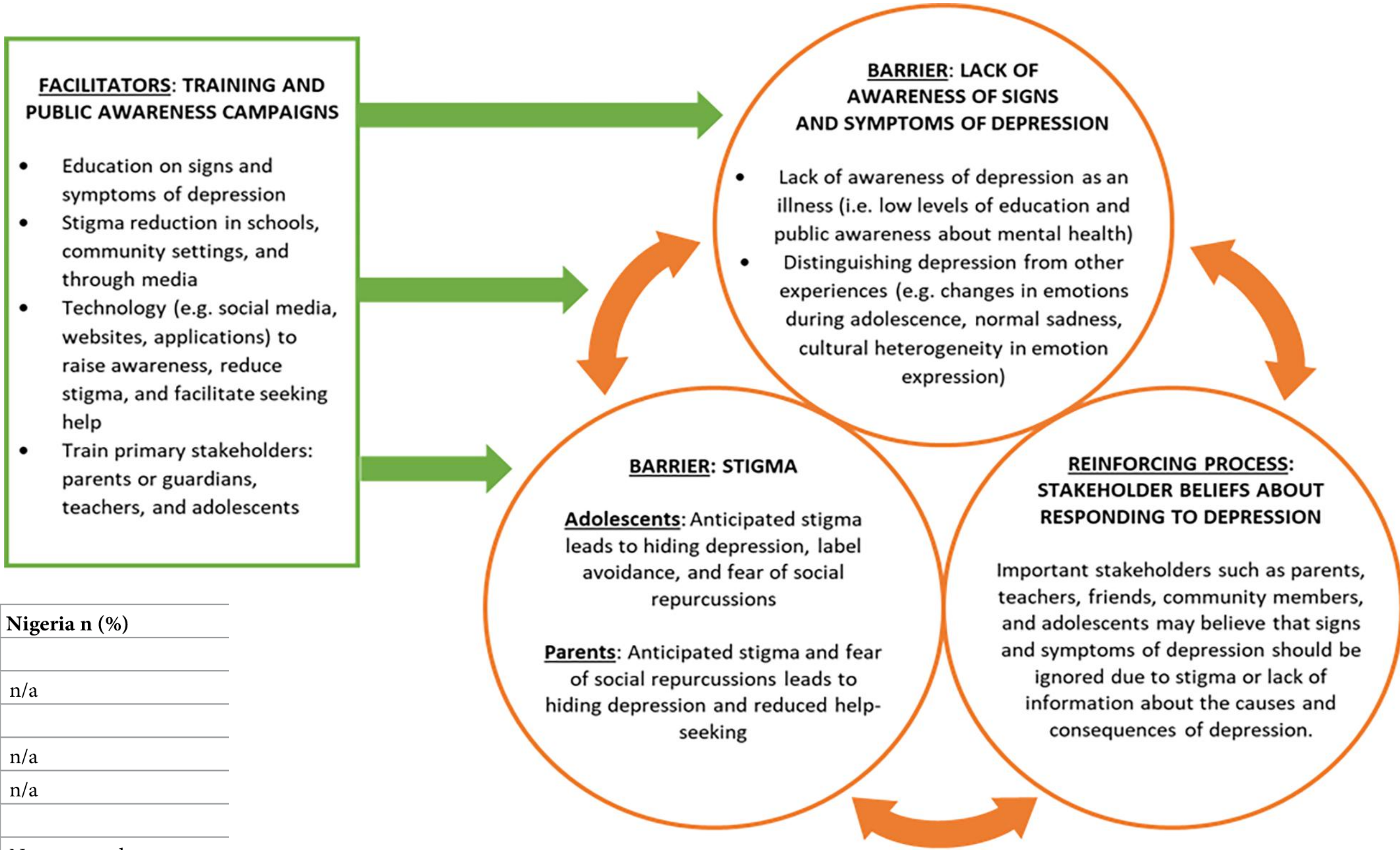
CONCLUSIONS

Respondents described training through public awareness campaigns, school policy, or social media as interventions to improve depression identification, but noted that social media could also contribute to exacerbating symptoms of depression. These findings suggest there are common perceived barriers and facilitators to the identification of depression in adolescents across diverse cultural contexts. These findings can inform the development of culturally sensitive strategies to address stigma and increase mental health literacy, and ultimately, to improve engagement with treatment and prevention of adolescent depression (Werner-Seider et al. 2017; Jordans et al. 2020).

OBJECTIVES

The goal of this study is to better understand the facilitators and barriers to identifying and treating adolescent depression in diverse cultural settings by using a qualitative approach and involving participants from Brazil, Nepal, and Nigeria. This study aims to gain insight into the cultural nuances surrounding depression identification and treatment engagement to inform the development of culturally compelling interventions based on local experiences and priorities

	Brazil n (%)	Nepal n (%)	Nigeria n (%)
Adolescents			
Age (mean)	15.4	18.5	n/a
Gender			
Female	6 (54.5)	10 (83.3)	n/a
Male	5 (45.5)	2 (16.7)	n/a
Adults			
Age (mean)	Not reported	37.8	Not reported
Gender			
Female	39 (81.3)	28 (46.7)	20 (47.6)
Male	9 (18.7)	32 (53.3)	18 (42.9)
Not reported	n/a	n/a	4 (9.5)
Respondent type			
Parents	12	18	3
Educators & School workers	12	10	13
Social workers	12	14	12
Mental healthcare providers	n/a	6	9
Health workers	12	6	5
Policymakers	6	6	4



“I didn’t understand my depression. No one helped me understand it, or maybe I didn’t want to understand it. That is why the identification of my depression was delayed. So, people in school should be made aware about depression and the ways to identify it.” – Adolescent in Nepal

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