

# Using lay health workers to identify and manage common mental disorders using problem solving therapy through a friendship bench in a resource poor setting in Zimbabwe

<b>Submission date</b> 09/07/2010	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered
<b>Registration date</b> 10/01/2011	<b>Overall study status</b> Completed	<input type="checkbox"/> Protocol
<b>Last Edited</b> 18/12/2020	<b>Condition category</b> Mental and Behavioural Disorders	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
		<input type="checkbox"/> Individual participant data

**Plain English summary of protocol**  
Not provided at time of registration

## Contact information

**Type(s)**  
Scientific

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## Additional identifiers

**Protocol serial number**  
N/A

## Study information

**Scientific Title**  
Locally adapted problem-solving therapy for depression and common mental disorders in primary care in Zimbabwe delivered through lay workers and a Friendship Bench: a pilot study

## **Acronym**

The Friendship Bench Project

## **Study objectives**

There is very limited evidence that sustainable interventions for depression and other common mental disorders (CMD) can be integrated into routine primary health care in Africa. In primary care clinics serving a high density suburb in Harare, a low-cost multi-component 'Friendship Bench Intervention' for CMD, based on problem-solving therapy, was developed to be delivered by trained and supervised female lay workers who were already respected in the community for their outreach role in human immunodeficiency virus (HIV)/acquired immune deficiency syndrome (AIDS), tuberculosis (TB) and health promotion. Our aim was to explore the potential of integrating this low-intensity mental health intervention into the work load of lay workers.

Outcomes included the number of people referred to the service and the number seen by the lay workers, qualitative data from layworkers on the acceptability and feasibility to them of providing this as part of their work load and participant scores pre-post problem solving therapy on the Shona Symptom Questionnaire for common mental health symptoms.

## **Ethics approval required**

Old ethics approval format

## **Ethics approval(s)**

Medical Research Council of Zimbabwe (MRCZ) REC approved on the 10th August 2006 (ref: MRCZ/A/1307)

## **Study design**

Observational cross-sectional pilot cohort study

## **Primary study design**

Observational

## **Study type(s)**

Quality of life

## **Health condition(s) or problem(s) studied**

Depression and common mental disorders

## **Interventions**

All individuals attending a local clinic who were identified by the local nursing staff as needing psychological care were referred to the 'Friendship Bench', a problem solving therapy based intervention run by lay health workers supervised by a clinical psychologist and psychiatrist. Initially all those referred were screened using a locally validated indigenous screening tool, the SSQ. All scoring above the cut-off score of 8+ received six sessions of problem solving therapy delivered over a six week period. All those identified as having severe depression were referred to the psychiatric hospital.

## **Intervention Type**

Other

## **Phase**

Not Applicable

**Primary outcome(s)**

Shona Symptom Questionnaire (SSQ) score after six sessions of problem solving therapy delivered through the friendship bench.

**Key secondary outcome(s)**

No secondary outcome measures

**Completion date**

30/12/2009

**Eligibility****Key inclusion criteria**

1. Residents of Mbare
2. Aged 16 years and over, either sex
3. Gave written informed consent. Those who were unable to give informed consent but needed mental health services were referred to the clinical psychologist or psychiatrist and their data was not included in the analysis.

**Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Adult

**Lower age limit**

16 years

**Sex**

All

**Total final enrolment**

355

**Key exclusion criteria**

1. Client requires acute medical attention such that they cannot participate in screening
2. Severe depression with risk features as diagnosed by primary care nurse

**Date of first enrolment**

01/01/2007

**Date of final enrolment**

30/12/2009

**Locations**

## Countries of recruitment

Zimbabwe

## Study participating centre

37 Baines Ave

Harare

Zimbabwe

CY 105

## Sponsor information

### Organisation

Counseling Services Unit (Zimbabwe)

## Funder(s)

### Funder type

Research organisation

### Funder Name

Counseling Services Unit (Zimbabwe)

## Results and Publications

### Individual participant data (IPD) sharing plan

### IPD sharing plan summary

Not provided at time of registration

### Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>	results	26/10/2011	18/12/2020	Yes	No
<a href="#">Participant information sheet</a>	Participant information sheet	11/11/2025	11/11/2025	No	Yes