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Summary of Research Programme

DIRECT-sc Depression Intervention via Referral, Education and Collaborative Treatment – Self Care

Self-care interventions for people with depression and chronic
physical conditions



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February 24, 2014

**DIRECT-SC : DEPRESSION INTERVENTION VIA REFERRAL, EDUCATION, AND
COLLABORATIVE TREATMENT – SELF CARE**

Date of Report: February 24, 2014

Funding agency: Fonds de la recherche du Québec - Santé (FRQ-S)
1- La prise en charge de la dépression chez les adults atteints de
maladies physiques chroniques (2009-2013) (Dossier 16384)
2- Renouvellement (2013 – 2016) (Dossier 26888)

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Acknowledgements:

Manon de Raad (Project Coordinator), David Loutfi, (Project
Coordinator), Christie Johnston, Russell Simco (student), Deniz
Sahin (student), Eric Belzile (statistician), Cindy Ibberson
(physician recruiter), Joannie Poirier-Bisson (consulting
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What is the DIRECT-sc research programme?

DIRECT-sc is a seven-year research programme (2009-2016), funded by Fonds de la recherche du Québec - Santé (FRQ-S). This research programme focuses on the detection and management of depression among adults with one or more chronic physical conditions using “self-care interventions”. More specifically, this research focuses on adults over the age of 40 who have a chronic physical condition(s), live independently, and are cognitively intact (meaning, do not experience any cognitive impairment).

“Self-care interventions for depression” are tools to be used by an individual to help develop skills to detect and manage of their own depressive symptoms. These tools may include support from a coach who helps the individual use the tools and set self-care goals. Self-care interventions for depression can be an important part of chronic disease management programs.

- **Phase one** of the research assessed the feasibility of self-care tools for depression among primary care adults with chronic physical conditions. Several depression self-care tools were tested and adapted prior to beginning. Two articles have been published on the feasibility study, the first to assess the overall results (<http://www.ncbi.nlm.nih.gov/pubmed/24294301>) and the second to explore family members’/friends’ roles in the intervention (<http://www.ncbi.nlm.nih.gov/pubmed/23986084>).
- In **Phase two** of the research a randomized trial was conducted (analysis is underway) to compare the effectiveness of the adapted tools with and without telephone support from a trained lay coach (<http://clinicaltrials.gov/show/NCT01521013>).
- **Phase three**(2013-2016) of the study includes a Collaborative Community Research Component - a series of inter-related studies that will take place in collaboration with community programs that provide services to adults with chronic physical conditions, such as cancer, arthritis, or visual impairment.

What is the Collaborative Community Research Component of DIRECT-sc?

The purpose of the Collaborative Community Research Component of DIRECT-sc is to adapt and test the depression self-care intervention developed during Phases One and Two to meet the needs of specific sub-groups of adults with different chronic physical conditions.

The objectives for the Collaborative Community Research Component are to:

- Explore the acceptability of different depression self-care interventions among individuals of various community programs;
- Explore the acceptability of the interventions for individual’ family and friends; and
- Design depression self-care interventions adapted to the needs of specific community programs.

What problem can DIRECT-sc address?

- Major depression occurs in at least 6% of the general adult population and rates of depression are several times higher among persons with chronic physical conditions.
- The presence of a chronic physical condition not only magnifies the depression, but the depression can in turn complicate the management and self-care of the chronic condition.
- Only a minority of adults with major depression have their depression detected. Even if detected, few people with depression receive adequate treatment. Psychological therapies are time-consuming

and beyond the expertise of many primary care physicians and social service providers, and there is an insufficient number of psychologists in the public sector to address this need.

- There is some evidence that self-care interventions for depression can have beneficial effects, but more research is needed to understand which interventions are effective among sub-groups of adults with chronic physical conditions.

Who should participate in DIRECT-sc as community collaborators?

Government and non-governmental community programs that provide services including support to adults who experience one or more chronic physical conditions can benefit from participating in this study.

CSSS-based programs that might be particularly suitable for the implementation of depression self-care interventions include: chronic disease management and educational programs, programs for the vulnerable elderly, and homecare programs. In addition, governmental and voluntary community agencies that provide services for people with chronic physical conditions, such as arthritis, visual impairment, or cancer, are also particularly well-suited.

To be eligible to participate, programs must:

- Express interest in developing or improving existing depression self-care interventions;
- Be willing to have staff/volunteers available for training, intervention delivery, and to assist in recruiting clients to use the self-care interventions
- Have a large patient population to recruit the necessary number of people for the study
- Exhibit diversity in programs and client populations.

How does the Collaborative Community Research Component work?

If an organization agrees and is eligible to participate, the DIRECT-sc team will work with two or three key staff members to determine which depression self-care interventions can be adapted and implemented in which programs.

To assist in adapting the self-care intervention to the specific program and context, the DIRECT-sc team will gather perspectives from clients, family members, and staff through focus groups conducted in each program. These focus groups will explore depression self-care intervention needs, preferences, and acceptability of different depression self-care tools among clients.

The DIRECT-sc team will then pilot-test the adapted depression self-care intervention materials with the clientele of the various programs.

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