Reviewer’s report

Title: More age-care staff report helping care recipients following a brief depression awareness raising intervention

Version: 1 Date: 3 December 2012

Reviewer: David Mellor

Reviewer’s report:

Review of the manuscript entitled: More age-care staff report helping care recipients following a brief depression awareness raising intervention.

This paper reports on an important topic. With the population aging, and the rates of depression increasing, it is vital that those who provide care for the elderly members of the community be aware of the signs of depression and how best to address this disorder. It is particularly important that aged care staff feel competent to engage in these activities. Many programs have been developed to achieve this end, but mixed results have been reported as far as the actual achievement of the end point aim of having care recipients’ depression appropriately addressed. The current paper provides a reasonable summary of this state of play and reports on the effectiveness of a new one session training program. In addition, the paper reports on the state of knowledge and efficacy of the participants pre intervention.

It is puzzling why general staff and managers were included in the study. Can it be demonstrated that they have a role in direct patient care, and that their responsibilities would allow them to intervene with depression? The inclusion of these group may have distorted the findings.

The coding of the helping responses raises some issues in that they are described as evidence-based or not. Staff were asked what they would do if a resident was showing symptoms of depression. In the Results, these responses are described as “correct help”. No information is given about these responses, especially examples. Is this variable assessing knowledge of the efficacy of CBT, pharmacology, activity scheduling etc.? Or does it relate to interventions the individual care provider could deliver? What evidence-based interventions can a manager, admin officer, or PCA deliver? What do they see their roles and the limits of their roles to be? Is talking with depressed care recipient an evidence based intervention? Does reporting to a SN equate to an evidence-based intervention?

It is a bit of a shock to find that those with training in mental health do not report greater confidence than other groups in dealing with depression at baseline. Should this be discussed?

The helping behaviours are also limited by role responsibility. Given that aged care facilities are generally very hierarchical organisations, it is uncommon for a
PA or admin person to feel that they can engage in at least 5 of the six prescribed helping behaviours. Further, in nursing homes, from which 32 participating staff came, residents cannot take many of the actions included in the list. Referrals to specialist service for example, involve senior staff or GPs making necessary arrangements. It is well documented that aged care staff find it very difficult to convey any suggestion to a GP.

While there is some analysis of dropout by demographics, it would be useful to determine if the dropouts differed on the outcome variables at baseline as well.

Overall, the results seem to tell the story that staff have some knowledge of appropriate interventions that doesn’t change over time. However, confidence in responding to depression increases, as does frequency of actions following training. This seems to suggest that increasing confidence is what is required to improve helping behaviours. Such increases may unleash the knowledge. This argument does not seem to have been made. Instead, the Discussion is a long list of baseline differences without much interpretation. It may have been better to deal with the baseline analyses first, and then discuss the outcomes of the training.

Other issues
It would be useful to describe the length and nature of the training in the Abstract
On page 4 the sentence “For example, a recent study [18] investigated staff knowledge and self-efficacy related to recognizing and responding to depression also looked at whether training improved numbers of referrals for depression” seems to have a grammatical error. The following sentence refers to “they”, presumably referring to the authors.

On page 5 it is stated that “very little previous work has looked at staff self-efficacy around providing assistance to depressed care recipients”. I am not convinced that this is the case. The authors might look into their own reference list as a start.

Page 6: it may be important to describe what a hostel is to help international readers. High care and low care are terms often used. It may also be useful to describe the demographics of the sample in more detail at this point.

**Level of interest:** An article of limited interest

**Quality of written English:** Acceptable

**Statistical review:** No, the manuscript does not need to be seen by a statistician.

**Declaration of competing interests:**
'I declare that I have no competing interests