

INTREPID II

February 2019 newsletter



Introducing INTREPID II...

After several months of training and preparation, we kicked off data collection for INTREPID II in **May 2018**.

INTREPID stands for the **INT**ernational **RE**search Programme on **Psy**choses **In** **D**iverse settings and its mission is to investigate psychotic disorders in 3 very different settings: **Nigeria**, **India**, and **Trinidad**. It follows a three-year pilot project in which we developed and tested our research methods.

People with psychotic disorders experience symptoms such as **hallucinations** (seeing or hearing things that are not there) and **delusions** (false thoughts or beliefs). Until now most research on psychotic disorders has been carried out in high-income countries, so our knowledge of psychotic disorders in the rest of the world (where 80% of the global population lives) is still limited.

INTREPID II aims to answer questions such as:

- ▶ How many people develop psychotic disorders in these places and are their symptoms the same in all contexts?
- ▶ What are the causes and the impacts of these disorders, and how are these different in different places?
- ▶ Why do some people recover, while others do not?
- ▶ What are the physical health needs of people with psychosis?

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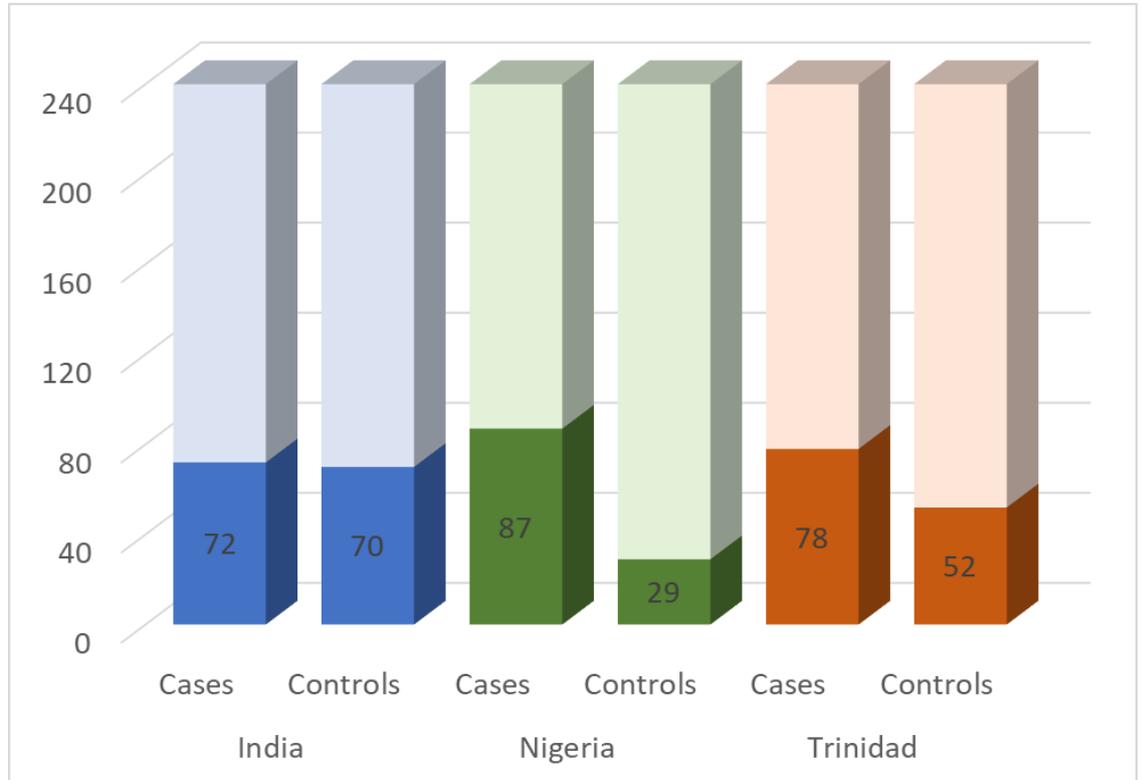
**KEEPING IT
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PROGRESS SO FAR

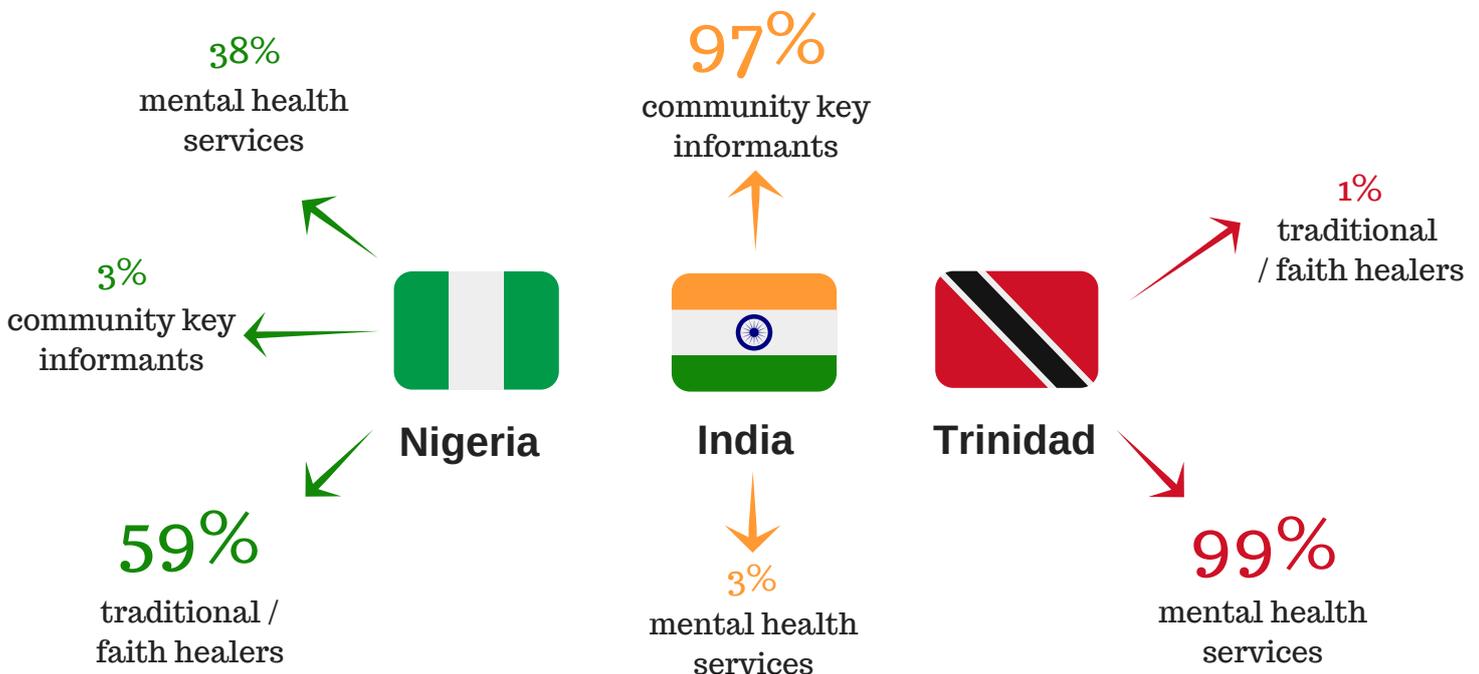
Our aim is to identify every person with an untreated psychotic disorder ("cases") aged 18-64 within our catchment areas, and to recruit and interview at least **240 cases and 240 controls in each site**. Controls are people without a psychotic disorder of the same gender and a similar age, recruited from the local area. We have now completed 9 months of baseline data collection.

here's how recruitment looks so far!



A big challenge in conducting this kind of research is to find those people with psychotic disorders who don't visit professional mental health services. We are recruiting cases through three sources:

1) professional mental health services, 2) traditional and faith healers and 3) key informants, including a team of local case-finders in the Indian site (pictured at the very start of the newsletter). There are big differences between the three sites in which we're identifying most cases, as you can see below.





AN INTERVIEW WITH...

Sujit John, study coordinator, India

What do you enjoy about working on INTREPID II?

There is so much to learn from being involved in a large multi-site study looking at the entire spectrum of factors related to psychoses, from risk factors to access to mental health care, to psychopathology and outcomes. The potential for designing services including intervention and delivery platforms in the long term based on the data collected is also something that excites me.

What have been the greatest challenges in carrying out this research so far?

Identifying and recruiting cases has actually been relatively easy. Recruiting controls has been the most challenging aspect of the study, so we need to pay special attention to make sure we can follow up controls at 2 years.

What do you hope will be the impact of INTREPID II?

Data from the study will inform policy changes which will pave the way for redesigning the delivery of mental health care and services, especially in rural communities.

Is there anything that has particularly surprised you so far in the project?

The biggest surprise has been how little things have changed on the ground for people with a psychotic disorder since the pilot, despite the fact that mental health services are now more widely available in the catchment area, including within the public health system.

Sujit (far right) with the INTREPID II team at the Schizophrenia Research Foundation (SCRF) in Chennai, India





A SPOTLIGHT ON: NIGERIA



Members of the INTREPID II research team at the University of Ibadan

National context

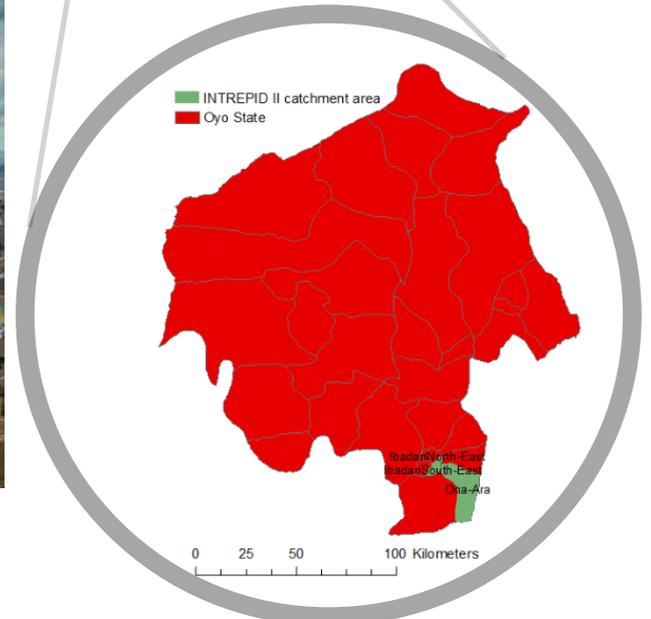
- Nigeria is **Africa's most populous country**, with over 181 million residents (the 7th most populated country worldwide).
- **Average life expectancy is 55 years**, the lowest in West Africa.
- **1 in 5 children in Nigeria die before the age of five.**
- The national **literacy rate is approximately 60%**.
- **Agriculture** is the largest sector of Nigeria's economy, employing **two-thirds of the workforce**.
- In Oyo state, where INTREPID II is being conducted, **nearly 30% live below the poverty line**.



The INTREPID II catchment area



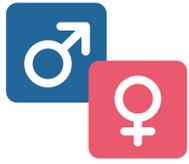
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The catchment area in Nigeria covers three Local Government Areas in and around the city of Ibadan, in **Oyo State, South West Nigeria**. The total population of this area is approximately **1 million people**, but the population is very young, so only 52% of these are aged 18-64 (the age group of interest for INTREPID II).

There is a **large number of traditional and faith healers** operating within this area, who offer treatment to people with psychotic disorders. The INTREPID research team is working with these providers to identify potential cases. You can read about the University of Ibadan's previous work to reduce abuse in these facilities through the PAM-D programme here: <https://bit.ly/2Tu9RyR>





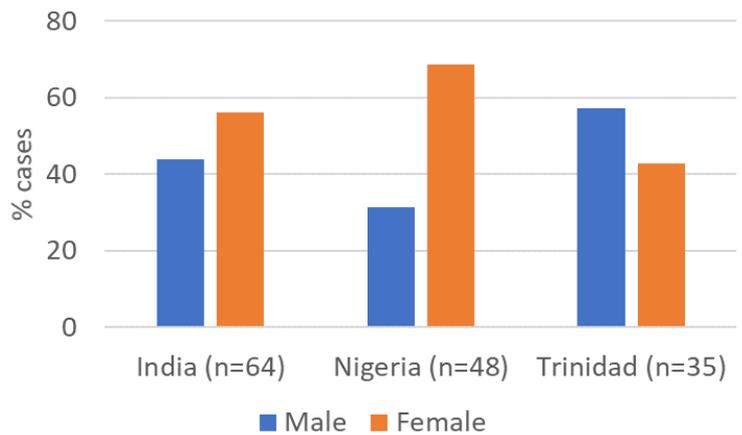
QUESTION IN FOCUS: How does gender relate to psychotic disorders?



From research in high-income countries, we know that men are at higher risk of psychosis than women: **3 men get psychotic disorders for every 2 women**. But is the same true in India, Nigeria, and Trinidad?

In INTREPID I, we found preliminary evidence of **higher rates of psychosis among women in Nigeria**, and no evidence of gender differences in India and Trinidad.

However, the size of our samples in the pilot study were small. In INTREPID II, we will investigate this question with much larger samples, to test whether the gender ratio is the same in these areas as has been reported in previous research.



INSIDE THE STUDY: Keeping it consistent



The IOPPN team with the Trinidad team during a site visit



A big challenge with multi-country studies is making sure that the methods we use are applied in the same way everywhere. When we find differences in psychotic disorders between India, Nigeria, and Trinidad, how do we know if this is a genuine difference, or if we're applying the measures differently in each place?

1. Training

The Principal Investigators in each site (who are all experienced psychiatrists) led training exercises for all research workers before data collection started.

2. Site visits

The team at the IOPPN visit each site periodically to meet with research workers and "recalibrate" how the measures and methods are being applied.

3. Patient videos

With patients' permission, we record some interviews for all research workers to rate using the same measures, allowing us to check that ratings are being made consistently in each site.

4. Consensus diagnoses

We randomly select cases from each site for the PIs/study psychiatrists to diagnose, allowing us to compare their diagnoses and discuss any differences.



WHO'S WHO?

Meet the research teams

Introducing the Principal Investigators and Co-Investigators...



Trinidad



The Trinidad team is led by **Prof. Gerard Hutchinson** of the University of the West Indies, St Augustine campus. **Dr. Joni Lee Pow** and **Casswina Donald** coordinate the INTREPID II study activities.



India



The India team is led by **Dr. Rangaswamy Thara** of the Schizophrenia Research Foundation, Chennai. **Sujit John** coordinates the INTREPID II study activities.



Nigeria



The Nigeria team is led by **Prof. Oye Gureje** of the University of Ibadan, in Oyo state. **Dr. Lola Kola** and **Bola Olley** coordinate the INTREPID II study activities.



Coordinating team



The programme is led by **Prof. Craig Morgan** (centre) of the Institute of Psychiatry, Psychology and Neuroscience (IoPPN), at King's College London. **Dr. Tessa Roberts** (second from left) is responsible for cross-country coordination of INTREPID II study activities. Providing expert guidance as Co-Investigators are **Prof. Sir Robin Murray** of the IoPPN (left), **Dr. Alex Cohen** from the Harvard School of Public Health (second from right), and **Prof. Helen Weiss** of the London School of Hygiene & Tropical Medicine (right).

Look out for future INTREPID II newsletters when we'll introduce you to the field research teams...

Want to learn more about the programme and follow our progress?



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