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A REVIEW OF NATIONAL HEALTH PROMOTION POLICY IMPLEMENTATION AND ITS ROLE ON SCREENING OF ADULTS FOR DEPRESSION IN PRIMARY HEALTHCARE CENTRES IN NIGERIA

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Abstract

The concept of prevention in National Health Promotion Policy includes early diagnosis of diseases such as depression through regular screening people to promote, and provide prompt treatment of afflicted persons to prevent complications, and improve health response outcome. The review assessed the implementation of National Health Promotion Policy, and its roles in facilitating depression screening for adults in primary healthcare in Nigeria. The methodology employed was searching of databases and *n*=25 articles that met inclusion criteria were selected. The selected articles were collated, analyzed and results interpreted. The results revealed that existing National Health Promotion Policy should be expanded to include depression screening in primary healthcare. In conclusion, health promotion policy implementation on depression screening in primary healthcare is not receiving the deserved attention. It is recommended that policymakers and stakeholders encourage task-shifting approach for successful implementation of depression screening in the primary care in Nigeria.

Keywords: Depression Screening, Implementation, National Health Promotion Policy, Nigeria

Introduction

The first National Health Promotion Policy [NHPP] in Nigeria was approved and adopted at the 49th National Council on Health meeting held in the year 2006 and was formally launched at 50th National Council on Health (NCH) on the 11th January, 2007 for implementation at the national, state and primary healthcare levels in the country. After a decade of implementation of the National Health Promotion Policy and due to emerging new trends in Health Promotion practices, the Federal Ministry of Health [FMoH] in the year 2016 revised NHPP (2006) in collaboration with relevant stakeholders. The revised version of the National Health Promotion Policy was approved and adopted at the 62nd National Council on Health meeting held in Asaba, Delta State from 9th to 13th September, 2019 (FMoH, 2019).

The reviewed National Health Promotion Policy [NHPP] (2017) is expected to play a significant role on the routine depression screening in primary healthcare because the goal of the policy is to reduce the burden of diseases in Nigeria. Despite the establishment of the National Health Promotion Policy (NHPP) in Nigeria, there is limited evidence on its effectiveness in enhancing mental health services, particularly in the screening and management of depression within Primary Healthcare Centres (PHCs). The NHPP is designed to improve the overall health and well-being of Nigerians by promoting healthy behaviors, preventing diseases, and ensuring early detection of health conditions (FMoH, 2019). However, the practical implementation of this policy, especially in the context of mental health promotion and depression screening, seems to be lacking.

Globally, depression is present in 10% to 20% of adults' patients attending primary care (Siniscalchi et al., 2020). In Africa, 29.2 million suffer from depression, with 3.9% affected in Nigeria and is largely undetected early partly due to limited or lack of regular screening of adults for depression in primary healthcare services (Adewuya et al., 2022). In Nigeria, the National Mental Health Survey indicated that approximately 5% of the population suffers from depression, yet only a small fraction receives screening and appropriate treatment (Gureje et al., 2020). The National Mental Health Act [NMHA] 2021 have mandated primary healthcare workers to screen for mental health problems as part of the routine clinical assessment in the primary healthcare settings in Nigeria (Kareem et al., 2023).

According to Adewuya et al. (2022), there is growing concerns that without routine screening of adults for depression and the participation of the primary healthcare workers in case-finding, the burden of the disease which included self-harm, and suicide that claims hundreds of thousands of lives yearly might not reduce appreciably. National Primary Healthcare Development Agency [NPHCDA] (2018) stated that the policy statement of National Health Promotion Policy is that intervention will be adequately resourced and deployed effectively to address the increasing burden of diseases, public health challenges and social determinants of health. The policy aimed to make positive contribution to the improvement of human

health using cost-effective approach to facilitate preventive measures and increase individual, family, community and social participation in health (NPHCDA, 2018).

The concept of prevention in health promotion policy included early diagnosis through regular screening for depression and prompt treatment to improve health response outcomes (FMoH, 2019). The implementation of National Health Promotion Policy since the year 2006 in Nigeria has not positively impacted routine adults' depression screening in primary care (WHO, 2021). This may be due partly to limited screening services, poor accessibility, perception, attitude and barriers to routine adults' depression screening in primary healthcare.

Conceptual Framework

The implementation of national health promotion policy is core to the Primary Healthcare concept of reaching larger communities through involvement of the primary health care workers. Part of the PHC's responsibilities is to prevent and treat diseases of public health priority that are responsible for high morbidity, disability and mortality (National Health Policy, 2016). The World Health Organization's concept of three pillars for the delivery of health promotion namely; good governance, health literacy and healthy city is the conceptual framework adapted to establish the connection between primary health care workers and implementation of national health promotion policy (WHO, 2020).

Good governance entails implementing clear policies, developing regulations and legislation that would make screening of diseases at primary health care accessible and affordable to ensure sustainability of the program in the communities (WHO, 2021). Health literacy brings about empowerment of individual to make healthiest choice and make decisions for themselves and their families. According to World Health Organization (2020), this can be achieved through organizing awareness program that will improve knowledge about the diseases. Healthy cities involve prioritizing policies that create synergy between health and other healthy public health policies to promote health equity, social inclusion and re-orienting health services for equity at primary care.

The concept articulated by WHO (2021) is relevant to the implementation of health promotion policy in primary health care. Application of the concepts to depression screening is a strategy towards increasing accessibility to depression screening services in primary health care (WHO, 2020). Good governance and healthy policies on depression screening will encourage early detection and prompt treatment of the afflicted adult population thereby reducing the burden of the disease. Health literacy will create awareness and improve primary health care worker's knowledge of depression screening which eventually will reduce the prevalence of depression and lead to healthy cities in Nigeria.

This study aims to examine the implementation of the National Health Promotion Policy and its role in the screening of adults for depression in primary healthcare centres in Nigeria. By identifying gaps and providing actionable recommendations, this research seeks to contribute to the enhancement of mental health services and the overall well-being of the Nigerian population.

The specific objectives are to: (i) review health policies documents that implement adults depression screening in primary care; (ii) assess implementation of National Health Promotion Policy (NHPP) on adults depression screening in primary care; (iii) describe policy gap on adults depression screening; (iv) discuss the role of primary healthcare workers on policy implementation, (v) recommendations on depression screening. The justification for this study is that it analyzed the implementation of National Health Promotion Policy at primary healthcare levels in Nigeria. This study is significance as it enables stakeholders and policymakers to track implementation of National Health Promotion Policy on routine screening of adults for depression in primary healthcare centres in Nigeria.

Methodology

Study design

This study analyzed implementation of National Health Promotion Policy in relation to facilitation of screening of adults for depression in primary health care. The study was conducted in January 2024 to assess the implementation of the policy. Various databases were searched for relevant journals to access published studies. Relevant articles on "National Health Promotion Policy" and "Depression Screening in Primary Health Care" were identified. Databases searched included EBSCO; PubMed; Cochrane database; CINAHL; Willey online library; ScienceDirect; and Web of Science.

The keywords used for the search are "National Health Promotion policy", "Policy on Health Promotion", "Depression Screening", "Primary Health Care", and "Conceptual Framework on Health Promotion". Total number of articles identified were n=83 but, N=22 investigated was based on the purpose of the study. Data collected from relevant studies were analyzed with focus on the objectives of the study. The national health promotion policy was analyzed in relation to implementation of the routine adults' depression screening in primary healthcare in Nigeria.

Articles Selection Procedure

Articles were screened by two independent reviewers to identify relevant studies; duplicate articles were removed based on their title and abstract. Also, articles were screened based on full-text reading to ascertain accuracy of the selection judgments. The

discrepancy between reviewers was resolved through discussion and consultation. All the authors contributed and the final search was conducted on 31st of March, 2024.

Inclusion Criteria: The studies included were those articles that met the following criteria: (i) described a study related to depression screening; (ii) articles on health promotion in Nigeria.

Exclusion Criteria: Studies published in French, Spanish, or any other language which are not in English language were excluded due to difficulty in the translation of the findings.

Results

Databases searched yielded *N*=83 articles after collation. A total of *n*=21 articles were identified as duplicates and removed. Considering the title and abstract, *n*=30 articles were excluded then yielding *n*=32 articles that are relevant to the study. Then *n*=32 articles were further screened and reviewed by full text, *n*=10 articles were excluded (*n*=03 article on intervention not targeting health promotion; *n*=04 not peer reviewed; and *n*=03 not in English). Thus, among the *n*=32 articles screened, *n*=25 were identified for inclusion in the study as in the PRISMA flow chart in Figure 1.

The results revealed that a total of 25 articles were included; intervention program on health promotion (10/25, 45%); developmental strategic plan on health promotion (03/25, 4.5%); articles on depression screening intervention (07/25, 27.5%); and articles on implementation of health promotion (05/25, 23%).

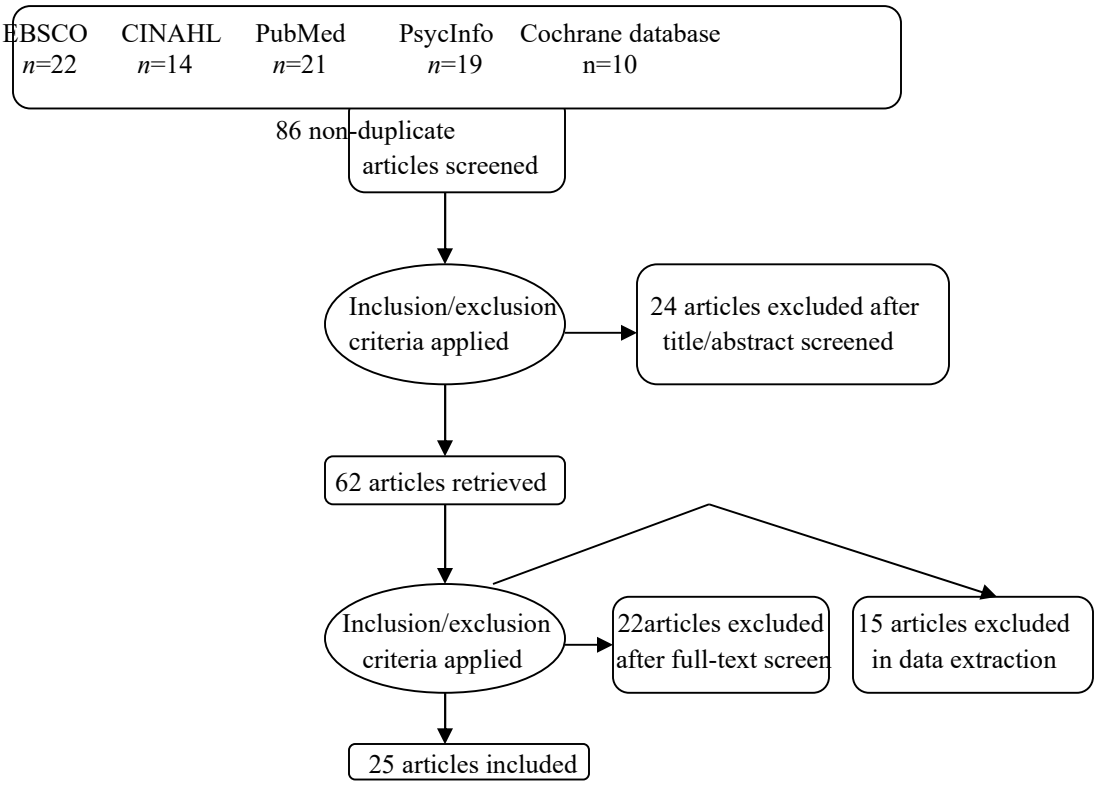


Figure 1: PRISMA flow chart of the selected articles

Discussion

Evidence-Based Policy Review

Policies on Depression Screening in Primary Healthcare

Health promotion is achieved through implementation of various policies that ensure that depression services are accessible and available to empower adults' population and sustain them in optimal health and wellness. Hence, the national health policies documents were reviewed to identify those that support and promote depression screening in primary care settings. Relevant statement from specific policy documents were analyzed and translated as in Table 1.

Table 1.
Policies that Support Adults Depression Screening in Primary Healthcare

Health Policies	Support for Health Promotion	Promote Adults' Depression Screening in PHC
National Health Promotion Policy 2016.	i). Health promotion should make informed decisions and empower individual, groups, and communities about their health; ii). Health promotion priorities should include communicable and non-communicable diseases that reflect the need of Nigerian like depression.	Not included in the policy document.
National Primary Health Care Development Agency Management Guideline For Primary Health Care Under One Roof 2016	i). The ward minimum health care package should include health promotion and community mobilization.	Not included in the policy document
National Health Act 2014.	i). The highest policy making body in Nigeria is the National Council on Health that preside over matters relating to health promotion and maintenance.	Not included in the policy document.
Comprehensive Mental Health Action Plan 2013-2030.		i). Strengthen effective leadership and governance for mental health promotion; ii). Provide comprehensive, integrated and responsive mental health and social care services to promote mental health in the community-based settings; iii). Implement strategies for promotion and prevention in mental health; iv). Strengthen information systems, evidence and research for mental health promotion.
National Mental Health Act (NMHA) 2021		i). Depression as one of the common mental health problem

		should be incorporated as part of the routine clinical assessment; ii). A strong community-based with focus on promotion of mental health in primary care; iii). A well-defined governance structure to support and drive depression promotion implementation; iv). Promote and protects human right of persons with depression condition; v). Address the critical funding gap to promote mental health.
Lunacy Act CAP 524 of the Law of Nigeria 1958.	i). discriminatory and discretionary in nature; ii). It is far from the World Health Organization (WHO)'s definition of mental health and person who suffer mental health issues; iii). Derogatory to people with mental health needs which is a violation of human rights.	Not included in the policy document.
Lunacy Ordinance 1916.	Mentally sick people should be treated separately in isolation.	Not included in the policy document.

Implementation of NHPP and Adults Depression Screening

Singh (2021) emphasized that national health promotion policy has a key role to play in ensuring primary health care workers facilitate and conduct routine depression screening for adults in the primary health care centres. Primary health care workers are frontline health providers who are trained to cover broad scope of practice and qualified to make a valuable contribution to health promotion policy implementation program (WHO, 2020). In reality, primary healthcare workers, beside their other routine clinical assessment have played minimal role in screening adults for depression in primary care which is an aspect of the national health promotion policy implementation program (Kareem et al., 2023).

The analysis of the National Health Promotion Policy revealed the importance of calling for collective action and support of the stakeholders through advocacy for behavioural change in primary care to achieve the goals of the policy. In addition, there is lack of frameworks on screening guidelines for depression in primary health care for systematic planning and management of the screening process which play critical roles. Furthermore, the revised National Health Promotion Policy (2016) reported that there are various health promotion programs in the primary health care but, stressed on poor implementation of the health promotion policy leading to shortfall in various preventive programs.

Screening for diseases is a secondary prevention and intervention which should be readily accessible and sustainable for cost-effectiveness of prevention strategies (Kareem et al., 2023; WHO, 2020). Also, the action plan for screening of the adults for depression must be clearly stated to sustain preventive measures as stipulated in National Mental Health Act 2021. In effect, availability of depression screening guidelines will facilitate achievement of the goal of the policy on disease promotion and prevention in the primary care (Singh, 2021). The review of the National Health Promotion Policy revealed lack of capacity and responsiveness to screening of adults for depression in primary care.

Policy Gap on Adults Depression Screening

The screening of adults for depression at the primary health care level is the key towards delivery of the World Health Organization integrated depression care (WHO, 2021). Though there are limited enabling national policies on both children and adults' depression screening at primary healthcare level. Hence, national health promotion policy on depression screening is poorly implemented or targeted towards certain clients with terminal disease condition.

Therefore, the importance of the screening for depression in primary healthcare may not be appreciated by non-mental health specialist. In reference to the comprehensive mental health action plan 2013–2030 (Singh, 2021), primary healthcare workers need to work together to strengthen depression care through implementation of health promotion policies to address depression problem in Nigeria. The comprehensive strategy is endorsed by the National Council on Health which is the highest health policy-making body in Nigeria.

Role of PHC Workers in Depression Screening Implementation

Significant evidence from studies indicated that large proportions of depression are undetected due to unresponsiveness of the primary healthcare workers to routine adults depression screening (Diószegi et al., 2023; Pfoh et al., 2020; Sample et al., 2020; Yildirim et al., 2022). According to Adewuya et al. (2021), many primary healthcare systems in Nigeria both private and public are yet to respond adequately to the burden of depression disorder. Qureshi et al. (2023) suggested that responsiveness is imperative towards achieving an intrinsic goal of National Health Promotion Policy on prevention of non-communicable and the process involves multiple interactions within the health system in Nigeria.

Undoubtedly, primary healthcare workers are expected to improve individual overall health and wellness. They can significantly decrease or reduce the burden of disability due to depression through early screening and prompt treatment. Thus, it is important that primary healthcare workers integrate routine adult depression screening into their services during initial clinical assessment since they are saddled with the responsibility of implementing national health promotion policy in the context of prevention which is the target and main goal of the primary health care in Nigeria.

Primary healthcare workers can also reduce the risk factors associated with depression and prevent or reverse the disease through regular screening to identify afflicted persons early and treat them appropriately. They are trained experts who can mitigate depression through secondary prevention to promote the overall health and wellness of the people. The analysis of the National Health Promotion Policy 2016 shows that there is little understanding of health promotion concepts and consumer rights. There is need to call for collective action and request support from the stakeholders for behavioral change at primary health care level to achieve the goals of the policy.

The available epidemiological evidence on prevention shows that regular screening of the population for diseases plays a major role in health promotion intervention. Depression disorder is a non-communicable disease that is preventable and non-transmissible disease that has slow progression and is caused by genetic or behavioural factors (WHO, 2019). According to World Health Organization (WHO, 2020), depression can be reversed by lifestyle modification through health promotion. Conversely, the primary healthcare workers are yet to recognize they have a key role to play in promoting screening of the adults for depression.

Presently, there is less commitment to adults' depression screening in primary care to sustain preventive measures rather more resources are committed to treatment instead of preventing and promoting overall health and wellness of the populace. In effect, the implementation of national health promotion policy requires clear action plan on adults' depression screening to achieve the goal of the policy on disease promotion and prevention in the primary health care.

Therefore, the first role is identification and screening: PHC workers, including doctors, nurses, and community health workers, are responsible for the initial identification and screening of depression among adults. Given the high prevalence of depression and the limited access to specialized mental health services, PHC workers are pivotal in bridging this gap. They use standardized screening tools such as the Patient Health Questionnaire-9 (PHQ-9) to identify symptoms of depression in patients attending PHC facilities (Afolabi et al., 2021). Their role is crucial in ensuring that depression is recognized early and that appropriate interventions are initiated promptly.

Secondly, health promotion and education: One of the key roles of PHC workers is to educate the community about mental health and the importance of seeking help for symptoms of depression. They engage in health promotion activities that raise awareness about depression, reduce stigma, and encourage individuals to access mental health services (Gureje et al., 2020). Through community outreach programs, workshops, and counselling sessions, PHC workers disseminate information on the signs and symptoms of depression and the availability of screening and treatment options.

Thirdly, referral and follow-up: PHC workers also facilitate the referral of patients with depression to higher levels of care when necessary. They play a critical role in the referral network by ensuring that patients who require specialized mental health services are connected with appropriate care providers. Additionally, PHC workers are involved in the follow-up of patients diagnosed with depression to monitor their progress, adherence to treatment, and response to interventions (Abayomi et al., 2021).

The fourth role is capacity building and training: to effectively perform their roles in depression screening, PHC workers require adequate training and capacity building. Continuous professional development programs are

essential to equip them with the skills and knowledge needed to identify and manage depression. Training programs focusing on the use of screening tools, counselling techniques, and the NHPP guidelines are crucial in enhancing the competence of PHC workers (World Health Organization, 2021).

Lastly, implementation challenges: despite their critical role, PHC workers in Nigeria face several challenges in implementing depression screening. These include a lack of adequate training, insufficient resources, high patient load, and the stigma associated with mental health issues. Addressing these challenges requires comprehensive strategies, including policy support, increased funding, and the integration of mental health services into primary healthcare (Gureje et al., 2020).

Conclusion

In conclusion, effective implementation of national health promotion policy by primary health care workers will improve detection and reduce the burden of depression disorder among the adults' populace in Nigeria. The existing national health promotion policy should be expanded to include depression screening in primary care. This is the time for primary health care workers in Nigeria to consider their active involvement in the routine clinical assessment of depression for early detection and prompt action.

Recommendations

A pragmatic step should be taken to develop and provide workable guideline to ensure depression screening is translated into primary health care services in Nigeria. Stakeholders, primary healthcare workers and policymakers should collaborate on health policy implementation to improve responsiveness in the primary health care settings. Health promotion policy and health system research should be incorporated into practice in the primary healthcare level in Nigeria with emphasis on depression screening.

Conflicts of Interest

Authors declared that no competing interest is associated with this policy implementation review.

References

Adewuya, A. O., Oladipo, O., Ajomale, T., Adewumi, T., Momodu, O., Olibamoyo, O., Adesoji, O., Adegbokun, A., & Adegbaju, D. (2022). Epidemiology of depression in primary care: Findings from the Mental Health in Primary Care (MeHPriC) project, Lagos, Nigeria. *International journal of psychiatry in medicine*, *57*(1), 6–20. https://doi.org/10.1177/0091217421996089

Abayomi, O., Adelufosi, A. O., & Olajide, A. (2021). The role of primary healthcare workers in the identification and management of mental health disorders in Nigeria: Challenges and opportunities. *Nigerian Journal of Psychiatry*, 19(1), 24-30.

Afolabi, M. O., Daropale, V. O., Irinoye, A. I., & Adegoke, A. A. (2021). Health-seeking behaviour and student perception of the health care services in a university community in Nigeria. *Health Services Insights*, 14, 117863292110135.

Bains, N., & Abdijadid, S. (2021). Major Depressive Disorder. Treasure Island (FL). *StatPearls Publishing*: https://www.ncbi.nlm.nih.gov/books/NBK559078/

Diószegi, J., Rihmer, Z., Torzsa, P., Pál, L., Czifra, Á., Gonda, X., & Sándor, J. (2023). Psychiatric health care need in Hungary identified by the short screening algorithm of depression and suicide risk used in general medical practices. *Scientific reports*, *13*(1), 14249. https://doi.org/10.1038/s41598-023-41437-2

Gureje, O., Oladeji, B. D., Abiona, T., Esan, O., & Eola, O. (2020). The prevalence of major depressive disorders in Nigeria: Results from the Nigerian Survey of Mental Health and Well-being. *Journal of Affective Disorders*, 263, 365-371

National Health Promotion Policy. (2016). https://wwwafrowhoint/sites/default/ files/2017-06/Nigeria_national_health_promotion_policy_feb2006pdf

Federal Republic of Nigeria. (2014). National Health Act. Federal Republic of Nigeria Official Gazette2014. p. A139-72

Federal Ministry of Health. (2019). National Strategic Health Development Plan II. In: https://www.health.gov. ng/doc/NSHDP%20II%20Final.pdf, editor. Abuja2019. p. https://www.health.gov.ng/doc/NSHDP%20II %Final.pdf

Kareem, Y. A., Musami, U. B., Mahmood, M. Y., Shuaib, A., & Ogualili, P. N. (2023). An x-ray of the National Mental Health Act 2021 of Nigeria: Opportunities, limitations and the way forward. *West African journal of medicine*, *40*(12 Suppl 1), S43

National Health Policy. (2016). Promoting the Health of Nigerians to accelerate Socio-economic Development. Federal Ministry of Health, September 2016. https://naca.gov.ng [Accessed 20 January 2024]

National Primary Health Care Development Agency. (2016). Integrating Primary Health Care Governance in Nigeria: PHC under one roof (Management Guidelines). Abuja, Nigeria: Federal Ministry of Health; 2016

National Primary Health Care Development Agency. (2018). Implementation Guidelines for Primary Health Care under one roof (PHCUOR). Abuja, Nigeria: Federal Ministry of Health

O'Connor, E.A., Perdue, L.A., Coppola, E.L., Henninger, M.L., Thomas, R.G., & Gaynes, B.N. (2023). Depression and Suicide Risk Screening: Updated Evidence Report and Systematic Review for the US Preventive Services Task Force. *JAMA.* 329(23): 2068–2085. doi:10.1001/jama.2023.7787

Pfoh, E. R., Janmey, I., Anand, A., Martinez, K. A., Katzan, I., & Rothberg, M. B. (2020). The Impact of Systematic Depression Screening in Primary Care on Depression Identification and Treatment in a Large Health Care System: A Cohort Study. *Journal of general internal medicine*, *35*(11), 3141–3147. https://doi.org/10.1007/s11606-020-05856-5

Qureshi, Z. N., Dileep, K., Saeed, F.A., Ejaz, M., Saeed, I.M., & Mostafa. A. (2023). Depression Screening and its Prevalence among Adult Patient Attending Family Medicine Clinic in Hatta, UAE. *International Journal of Clinical Science and Medical Research*, *3*(8), 172–178. https://doi.org/10.55677/IJCSMR/V3I8-03/2023

Samples, H., Stuart, E. A., Saloner, B., Barry, C. L., & Mojtabai, R. (2020). The Role of Screening in Depression Diagnosis and Treatment in a Representative Sample of US Primary Care Visits. *Journal of general internal medicine*, *35*(1), 12–20. https://doi.org/10.1007/s11606-019-05192-3

Singh O. P. (2021). Comprehensive Mental Health Action Plan 2013-2030: We must rise to the challenge. *Indian Journal of psychiatry*, *63*(5), 415–417. https://doi.org/10.4103/indianjpsychiatry.indianjpsychiatry_811_21

Siniscalchi, K. A., Broome, M. E., Fish, J., Ventimiglia, J., Thompson, J., Roy, P., Pipes, R., & Trivedi, M. (2020). Depression Screening and Measurement-Based Care in Primary Care. *Journal of primary care & community health*, *11*, 2150132720931261. https://doi.org/10.1177/2150132720931261

World Health Organization. (2020). *Global Action Plan for the Prevention and control of Non communicable Diseases* 2013–2020. Available online: http://apps.who:int/iris/bitstream/10665/94384/1/97892415062 36_emg.pdf.2013

World Health Organization. (2021). *Comprehensive Mental Health Action Plan 2013–2030. Geneva*: https://iris.who.int/bitstream/handle/10665/345301/9789240031029-eng.pdf?sequence=1

World Health Organisation. (2019). *Health Topics: Health Promotion*. https//www.who.int/topics/health-Promotion /en.

World Health Organisation. (2020). *Priority, Non-communicable Diseases and Conditions*. https://www.who.int/healthtopics/noncommunicable-diseases#tab=tab_1

World Health Organisation. (2020). *National health policies, strategies, and plans*. https://www.who.int.national policies.

Yildirim, E., Bradley, N., Gaynes, P. K., Pence, B.W., & Swann, S. (2022). The cost-effectiveness of depression screening for the general adult population, *Journal of Affective Disorders*, 303, 306-314, https://doi.org/10.1016/j.jad.2022.02.044.