Psychotherapy for depression from the point of view of economically disadvantaged individuals in Chile and Colombia

Mariane Krause1,*, Henry Daniel Espinosa-Duque2, Alemka Tomicic3, Ana Catalina Córdoba2 & Daniel Vásquez1

1 Pontificia Universidad Católica de Chile, Santiago, Chile
2 Universidad CES, Medellin, Colombia
3 Universidad Diego Portales, Santiago, Chile

*Corresponding author. Email: mkrause@uc.cl

Keywords: access to psychotherapy, depression, experience with psychotherapy, poverty

doi: 10.1002/capr.12171

Abstract

Background: This article presents a qualitative study, conducted in Chile and Colombia, on mental health care access and experiences with psychotherapy from the perspectives of economically disadvantaged clients. Current epidemiological data show it is important to conduct psychological interventions to address depression in poor populations, given the high prevalence of this disorder in these groups. However, despite efforts made in both countries at the health care policy level, the impact of the available psychological care has been weaker than expected. Aims: Based on this observation, this study sought to collect more information for understanding this problem by incorporating patients’ views. Materials & Methods: To shed light on this issue, 24 participants from Chile and Colombia were interviewed with respect to their opinions on access to psychotherapeutic care and their experience with it. Semi-structured interviews conducted were analysed using Grounded Theory procedures. Results: The facilitating and impeding factors that low-income people have regarding access to psychotherapy, in an institutional context, and specific challenges involving changes in their understanding of their problems and their own role in recovery are presented. These changes involve distancing themselves from their original culturally-shaped understanding of psychological disorders. Discussion: The influence of psychotherapy as a force capable of shaping culturally determined meanings in clients from economically disadvantaged areas is problematised. Conclusion: The results of this research may encourage clinicians to see the client’s uniqueness within a certain social order and a social network as different from that of the therapist.

Depression and poverty: epidemiological evidence

Research has revealed a link between income levels and depression, with this disorder being more frequent in contexts of poverty (McLeod & Shanahan, 1996; Ohuoha, 2011). Globally, people living in poverty are more likely to suffer from depression (Vöhringer et al., 2013), at a rate 1.5–2 times higher in disadvantaged economic contexts than in advantaged ones (WHO, 2013). As Errázuriz, Valdés, Vöhringer and Calvo (2015) point out the link between poverty and depression constitutes a vicious circle, as the lost productivity and mental health costs affect a person’s economic standing as well as that of his/her family, thus maintaining or worsening his/her deficits.

Specific studies conducted both in Colombia and in Chile confirm this connection between poverty and depression (Gómez-Restrepo & Rodríguez, 1997;