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**Background:** Saint Vincent and the Grenadines (SVG) is an Eastern Caribbean country with a high rate of Alcohol Use Disorders (AUDs) but inadequate community mental health resources to address them. This study sought to gauge attitudes toward and knowledge of alcoholism among church leaders in SVG in order to investigate their potential role in community alcohol interventions.

**Methods:** We gathered data through 30 semi-structured one-on-one interviews with church leaders in three towns: Barrouallie, Kingstown, and Calliaqua. Transcripts from interviews were qualitatively coded for themes relevant to the topic of alcoholism in SVG, and final themes were reached via consensus among the investigators using a grounded theory-based approach.

**Findings:** We found that church leaders in SVG have considerable knowledge regarding alcoholism on both personal and societal levels. Church leaders were divided on their permissiveness around drinking but almost unanimously deemed alcohol a major problem in SVG. However, they largely believed that drinking tends to be a problem only for people outside the church, especially the youth and the poor. Clergy also believed that their churches' unique strengths, in particular longstanding community connections, would increase their effectiveness at addressing alcohol problems in partnership with local organizations.

**Interpretation:** SVG church leaders' consistent concern about drinking problems in their communities and their commitment to community outreach suggest that they are an abundant and energetic resource for addressing AUDs in SVG. However, their impact may be hampered by churches' differing views on drinking, the perception that drinking problems only affect non-church members, non-church members' possible reluctance to seek help from churches, and a misinformed approach to tackling drinking.

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### **The Prevalence and Risk Factors of Depression: A Comparison Study of Garment Factory Workers in Bangladesh**

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**Program/Project Purpose:** Poverty-level wage labor is rising overseas as western corporations outsource for cheaper and abundant labor. The workplace health, safety and wellbeing of these workers is neglected. In developing countries evidence on the prevalence and risk factors of mental health conditions is limited. Our study aim was to determine the prevalence of depression and report its

associated risk factors in such a population- Bangladesh's female garment factory workers.

**Structure/Method/Design:** Our study surveyed 591 individuals- 308 garment workers and 283 as a comparison group (tailors, beauticians, store workers, et cetera). Data collection occurred in February 2016 with the assistance of the Centre for the Rehabilitation of the Paralyzed, a local organization, which provided translators who helped in the administration of the surveys. The primary outcome was the Patient Health Questionnaire 9 (PHQ9) depression score of 10 or greater.

**Outcome & Evaluation:** The garment workers' average age was 27.8 years, 80.1% were married, 99.4% working full-time, and 38.3% lacked education. The comparison group's average age was 32.7 years, 70.6% married, 71.2% working full-time, and 46.6% lacked education. The prevalence of depression was 23.5% (20.9% among garment workers and 26.4% among others), which did not reach statistical significance. However, part-time employment (Odds Ratio: 2.36, 95% CI: 1.01-5.51), chronic pain (OR: 1.67, 95% CI: 1.01-2.78), two or more traumatic life events (OR: 6.43, 95% CI: 2.85-14.55) and dysuria (OR: 2.50, 95% CI: 1.02-6.15) were significantly associated with moderate-to-severe depression. Furthermore, moderate-to-severe depression rates were lowered by 11% for every 1000 taka more earned.

**Going Forward:** Corporations that outsource labor should be made aware of the increase rates of depression and its monitoring correlation and provide better wages and working environments. Screening and treating these at risk groups and creating awareness domestically and internationally on mental health should be a priority.

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### **Characteristics and Motivations of Women of Reproductive Age in Uganda with Rheumatic Heart Disease: A Mixed Methods Study**

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**Background:** Rheumatic heart disease (RHD) is a leading cause of premature morbidity and mortality in low- and middle-income countries (LMICs). Women of reproductive age are a vulnerable group of patients with RHD, due to greater risk of cardiovascular complications and mortality during pregnancy. Warfarin can prevent some of these complications (e.g. stroke) but can also cause fetal abnormalities. Yet, in an international study, <5% of women with RHD of childbearing age were using contraceptives, and one in five pregnant women with RHD were taking warfarin despite known teratogenicity. It is unclear whether this suboptimal contraception and anticoagulant use during pregnancy in LMICs is due to