**Interview schedule for GPs**

Please note that the interview questions will be informed by the findings that emerge from focus group discussions, and from the analysis of secondary consultation data. Should the questions identified differ substantively from those listed here, we will inform and gain approval from the relevant REC before any interviews with GPs take place.

**Introduction**

* Thank person for their participation
* Go through the participant information sheet and answer any questions
* Remind participants that there are no right or wrong answers.
* Remind participants that they do not have to answer any questions if they do not want to and that they are free to leave whenever they wish.
* Get informed consent for use of audio recorder. Negotiate written informed consent

**Background information / experience**

1. Collect limited personal data (name, age, ethnicity)
2. Collect data on time worked in area (and where worked before), time worked as a GP, where qualified/trained?
3. What is your framework for understanding mental health issues and for managing them? Prompt discussion around the role of diagnosis, whether the GP has particular issues/questions they tend to discuss.

**Challenges**

1. What are the main health and social challenges faced by people from the study site (age 18-65)? Prompt discussion over mental distress – how this is defined (by GPs, by patients); what are the main causes (as seen by GPs, by patients)? How does this impact on mental health and wellbeing? How this may have changed over time; who is most affected, why do they think this is?

**Responding to mental distress**

1. How does discussion over mental distress emerge/manifest within consultations? Prompt discussion around responses e.g. openness, denial, stigma, responding to cues etc. and how this may relate to different gender and age groups. Differences between consultations focussed on mental health and those where it comes up amongst other issues?
2. In your experience, what are the factors that influence people’s decisions to seek medical support for distress? Prompt discussion around moral narratives (e.g. those suggesting people are ill and need treatment; those suggesting a need for people to be responsible and help themselves), how prevalent/evident they feel they are, their source, role etc., if/how they emerge within consultations, how this may differ across groups, the role of self diagnosis and the influence of others / internet.
3. What kind of support do people seek? Prompt discussion around use of antidepressants, talking therapies, social interventions, self help etc., patient expectations, factors informing expectations. Prompt discussion on the relatively high use of antidepressants amongst low-income communities, and reasons for this, relationship between medication and talking therapies.
4. Explore factors influencing intervention/non-intervention decisions?

**Effective support**

1. Explore ideas relating to effective/non effective consultation practice and factors that act as constraints/opportunities for this (including systemic and logistic factors). Influence of self-referral and what happens if patient does not follow this up?
2. Explore ideas relating to effective support beyond the surgery. Prompt discussion on role of other service providers, informal support networks, self-help.
3. Explore ideas about what kind of information/resources would be helpful for GPs to provide effective support for people in low-income communities who experience mental distress.

*Thank the participant for their time. Ensure they have the research team contact details in case they have any queries. Offer to send the participant a summary of the discussion for them to check and ensure that there have been no misunderstandings in interpretation. Alert participant to the Regional Health Practitioner Workshop (month 26).*