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Costas T. Lambrew Research Retreat 2022

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### Applying the 'problem and solution trees' participatory method to design a public health program on COVID 19 testing for underserved populations

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# Applying the ‘problem and solution trees’ participatory method to design a public health program on COVID-19 testing for underserved populations

Sclar, G.D., Hudak, N., Kohut, M., Jacobs, E.A. & Fairfield, K.M.

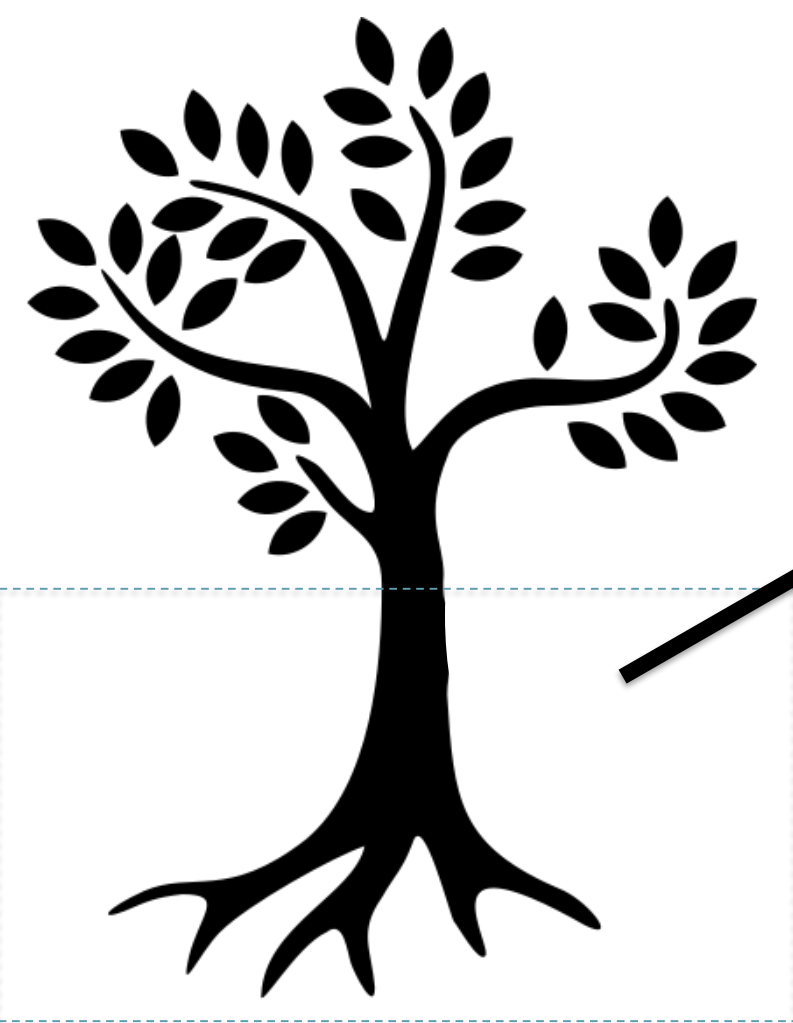
## INTRODUCTION

- Socially vulnerable populations experience higher rates of COVID-19 infection and mortality.
- Testing is an important tool for reducing the spread of COVID-19 infection and initiating treatment.
- Despite being at greater risk, vulnerable populations are less likely to seek testing.
- Collaborating with four community partners — Greater Portland Health, Preble Street, Portland Community Free Clinic, and ProsperityME — we are designing a program to improve testing among unhoused, low-income, and immigrant communities in Portland, ME.

Here we present a **case study example** of how we applied qualitative research and ‘problem and solution trees’ (PAST) to identify barriers to testing for people who are unhoused.

## METHODS

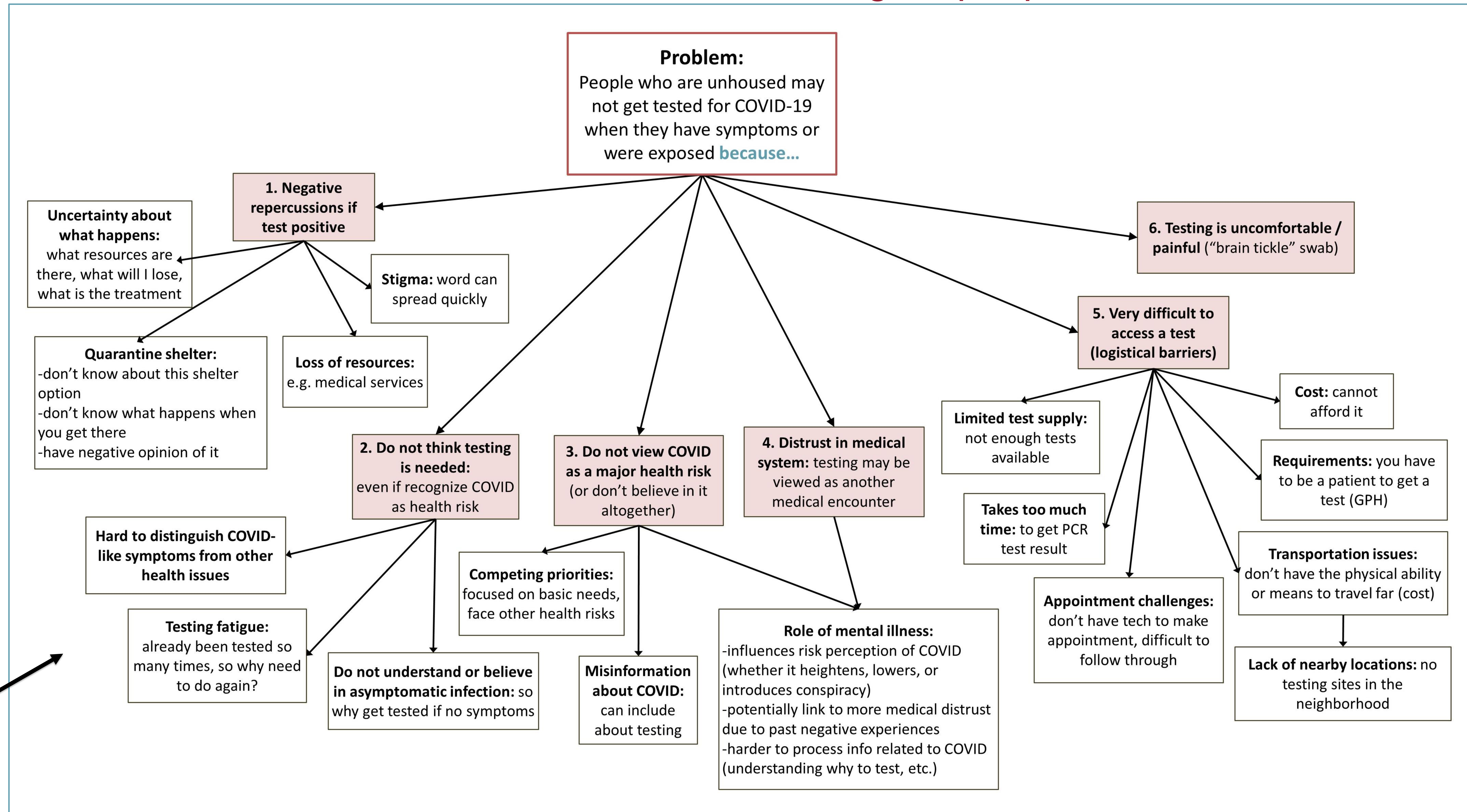
- PAST is a participatory method used to develop public health programs.
- A tree provides visual representation of health problem (trunk), root causes to the problem (roots), and potential intervention solutions (leaves).
- Researchers & community stakeholders collaborate to generate the tree.



### Our approach:

1. We conducted qualitative interviews with 6 key informants and 8 participants between October – November 2021.
  - Staff from Preble Street and Preble Street Learning Collaborative (PSLC) and people experiencing homelessness recruited by PSLC or shelter staff.
2. Analyzed transcripts using qualitative description to identify root barriers to testing.
3. Constructed bottom half of the PAST (i.e. ‘problem tree’) based on the qualitative findings.
4. Held workshop with our key informants to gather reflections on the root barriers and brainstorm solutions.

## Problem Tree: Root barriers to COVID-19 testing for people who are unhoused



## RESULTS

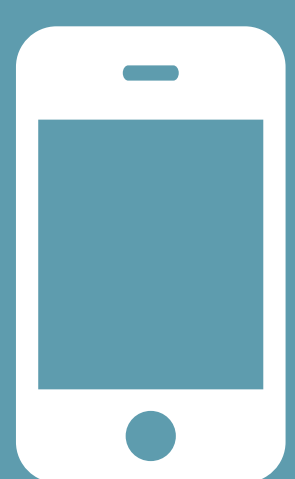
We identified 6 root barriers to COVID-19 testing for people who are unhoused (see red shaded boxes). For example, people may not seek testing because of the anticipated negative repercussions from testing positive, such as loss of resources, and many uncertainties (root barrier #1).

During the PAST workshop, key informants brainstormed potential solutions (i.e. program ideas) for some of the root barriers:

#1. <i>Negative repercussions</i>	Train staff on how to provide trauma-informed messaging about what happens if you test positive and how the quarantine shelter works.
#5. <i>Difficult to access tests</i>	Provide low-barrier walk-up testing clinics at locations where individuals already seek services
#4. <i>Distrust in medical system</i>	Design the walk-up testing clinics so they feel casual and familiar, rather than “medical”

## DISCUSSION

- This is a unique application of PAST by basing root barriers in qualitative research and focusing on COVID-19 testing.
- Our approach may prove useful to other community-based studies working to address COVID-19 health inequities.
- **Limitations** = Interviews were conducted in Oct-Nov 2021 but the COVID-19 pandemic “landscape” is constantly changing. It’s possible some of the root barriers are no longer relevant or new barriers have arisen.
- **Next Steps** = Conduct additional PASTs with relevant stakeholders focused on COVID-19 testing for low-income and immigrant communities.



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