

Social Sciences Working Group

Mental Health of HCW protocol

Team Leaders Meeting

Date: 27/08/2020

Location: Zoom

- **Priya:** I will quickly go through the protocol and then will invite feedback. Mixed methods study on the mental health, psychosocial difficulties, stigma etc of health care workers on the front line. Brief outline (see previous email for the full protocol):
 - Phase 1: Quali :Focus Group Discussions – (groups = doctors/nurses/researchers etc)) this will be more exploratory, and quanti: assess mental health issues
 - Phase 2: Quali to understand the psychosocial facilitators and barriers that influence healthcare delivery for COVID-19 among HCW; In depth interviews based on findings
 - Study population = All Health care workers, whether in hospitals/communities
 - Quali in phase 1 will define which quanti data collection tools will be used
- **Julio:** Great job in developing this protocol. It's very interesting and I'm looking forward to seeing how this protocol will develop further. Clearer definitions on the outcomes; 'MH challenges'/'psychosocial consequences' are not very clear – it is clearer in the methods section more precise things you are looking for, so maybe incorporate this clarity into the introduction; the issues which you are looking for will need to be stated early on. The phases are not too clear – I understood that we have quali then quanti in phase 1; why do one first? Need to clarify why they are in the order that they are in. Design a questionnaire for the focus group discussions? Are the phase 1 stages independent or not? And why? More clarification needed.
- **Priya:** Do you think that we should do a purely qualitative stage first which would lead to the quanti stage?
- **Julio:** As you mentioned I really like that way of framing the phase 1 (quali -> quanti) so you can select the correct questionnaires and data collection tools. Could the last quali phase also be done in the quali?
- **Priya:** If we manage to identify the significant variables in phase 1 we can go into these results further with the interviews of phase 2 quali
- **Vina:** I think that phase 1 is to formulate a robust questionnaire which can then give us a framework for an in-depth interview. Analysis of the quanti part with the quali would give us a better insight into why the quanti come out
- **Julio:** You will not have to create a questionnaire as you have the quanti data collection tools. For me it doesn't follow necessarily that you will find a clear cause for the mental health issues. Eg stigma would be a huge topic to try and explain and offer solutions to. I feel that it is still very broad. Why do the first quali if you already have the quanti data collection tools?
- **Vina:** Many of these scales are context specific. How do we know if these same scales can be used in all populations; to fine tune the quanti part the FGDs may be important.
- **Julio:** A theory of behavioural change; how will you then analyse the mental health and psychosocial issues? You need to mention your theoretical foundation for this study
- **Priya:** We thought about the theoretical framework but have not included it yet.
- **Bunu:** Thank you Priya and Vina for the great job so far. The title: it seems to me too broad – you have not mentioned the setting – where precisely it will be implemented. Background: Need to talk more about COVID-19, who are the healthcare workers; levels of care and how

each is related to the complexity of cases presented by COVID-19. The background you have written is more justification of the study. Para 2 line 4: Need for a citation? Under the research question, for me if you leave it it needs slight revision; 'what are the challenges to health care workers in health care provision/as a result of COVID-19'. Mixed methods: exploratory/explanatory/triangulation/embedded. Need to come up with tentative numbers for eg Focus Group Discussions; eg no more than 10, minimum of 5

- **Priya:** We put minimum of 5 groups, not people
- **Bunu:** need to state how many men/women etc. Should state that these studies will be conducted in LMICs. On 'rural vs urban', COVID-19 has no boundaries (Bunu's connection cut out)
- **Priya:** Douglas, any comments?
- **Douglas:** I wanted to look at the research questions: Number 2 mentions 'exposing' – I think this means that you are intentionally doing it. Change it to 'potentially being exposed to'. Targeting those hospitals which aren't offering COVID-19 care – I didn't quite understand this part
- **Priya:** eg in India we have COVID-19 hospitals and COVID free hospitals;
- **Davide:** Great teamwork. Will the different phases have different populations?
- **Priya:** Quali and Quanti of phase 1 should be the same population, phase 2 different
- **Davide:** This needs to be specified so anyone using this protocol can understand which study populations should be used. One more question: Will you collate the data collection tools into 1 to give to focus group discussion members? You need to clarify exactly how you will use these tools etc – we don't want a participant to go through lots of questionnaires but whether we use 1 large questionnaire or use specific tools based on the FGD is up to you.

Next steps: Gather more comments by email, incorporate feedback, finalise protocol version, upload to tool next week