

Policy and Social Care Move Fast: How Rapid Qualitative Methods Can Help Researchers Match Their Pace

Health Equity

Date Posted:

Apr 25, 2024 Image



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The field of social care integration, which refers to the study and implementation of clinically based programs to address the social needs of patients and families, is advancing at an increasingly rapid pace. This acceleration, <u>driven by heightened need post-pandemic</u> as well as <u>mandates</u> at the state and federal levels for health systems to implement screening and referral programs, has increased the <u>urgency for high-quality evidence</u> to support policy decisions about the delivery of social care—in other words, how health systems identify and address social needs, like access to healthy food and safe housing.

Qualitative research is particularly useful in guiding social care integration as it can shed light on the patient or caregiver experience of participating in social care interventions, barriers to getting help that should be addressed, and appropriate next steps from the perspective of those directly impacted.

However, traditional qualitative data analysis can be time consuming, and evidence-based solutions for addressing families' social needs from the clinical setting are needed in the short term. In this post, I'll share how we adapted and applied rapid qualitative methods to a social care-focused study as an example of how this approach can be used to inform social care integration in real time.

Integrating a Rapid Research Approach

The Socially Equitable Care by Understanding Resource Engagement (<u>SECURE</u>) study is a mixed method pragmatic trial aimed at understanding how best to increase family-level engagement with social resources from the pediatric health care setting. Caregivers in the study were randomized to complete one of three different social assessments (surveys asking about their social circumstances and/or desire for social resources) before receiving a resource map on their personal smartphone where, if interested, they could search for community resources in their neighborhood. Caregivers also had the option of talking to our study-specific resource navigator to receive additional support finding resources.

The overall goal of the qualitative component of the study is to capture caregivers' preferences and experiences receiving social care through SECURE. Our traditional qualitative protocol involved transcribing caregiver interviews verbatim, coding transcripts and conducting thematic analysis. Recognizing the need for implementation-oriented results on a fast timeline, our team explored rapid qualitative methodologies to supplement the traditional approach. The rapid methods we chose were derived from <u>existing literature</u> on rapid qualitative approaches, which were then adapted to suit our study's protocol and the social care field in general.

In our rapid approach, interviewers took notes using a structured template during or immediately after each caregiver interview. The template was designed to capture the data most salient to social care integration efforts such as caregiver's likes, dislikes and preferences about receiving social care at their child's doctor's office. Then, content from the templates was transposed onto an analytic matrix, where we compared data across participants to identify themes. While we explored the full range of themes that emerged from our caregiver interviews in traditional qualitative analysis, we wanted to be sure that rapid analysis focused on findings that would be most applicable to social care integration efforts so the results could inform social care policy at Children's Hospital of Philadelphia (CHOP) and elsewhere in real time. For example, what parts of participating in SECURE were helpful for caregivers? Did anything make them uncomfortable?

To ensure that our rapid approach produced results in line with those generated through traditional methods, we analyzed ten of our interviews using both traditional and rapid methods and compared the results. This analysis yielded a 92.8% theme match—meaning the two qualitative methods yielded largely the same themes. This builds upon previous literature, indicating that rapid analysis can be an effective tool in capturing implementation-oriented themes from qualitative data.

How the SECURE Study Can Inform Future Research Efforts

Our rapid qualitative methods allowed us to effectively adapt and respond to the quickly evolving landscape of social care integration, even before we had the full study results. I personally saw this first-hand while working with the SECURE team in 2023 conducting caregiver interviews. For example, we were able to inform hospital efforts in response to a recent insurance requirement of health systems to share caregivers' responses to social screening questions. We successfully gathered patients' feedback on this new requirement and shared this information and suggestions for what CHOP could do to make caregivers feel more comfortable answering social assessment questions.

While not intended to replace traditional qualitative analysis, being able to produce actionable qualitative findings in a timely manner through rapid methods has allowed SECURE findings to help shape social care interventions at CHOP and beyond in real time.

Our hope is that other researchers in social care who face time pressures may find similar rapid qualitative methods as a useful and effective approach to adapt to the dynamic nature of the field and generate family-centered solutions faster than would otherwise be possible.

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