Resuming In-person Psychological Treatment in the Era of COVID-19:

Barriers & Facilitators

Gul Saeed¹, Sabrina Hossain², Nour Schoueri-Mychasiw² and Daisy Radha Singla^{2,3}

¹ Dalla Lana School of Public Health, University of Toronto, Toronto, Canada

² Department of Psychiatry, Sinai Health System, Toronto, Canada

³ Department of Psychiatry, University of Toronto, Toronto, Canada

E-mail: gul.saeed@mail.utoronto.ca

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Abstract

Background: Patient-centered research has emerged as a promising model to adequately address the needs and preferences of patient populations with mental disorders. The Scaling Up Maternal Mental healthcare by Increasing access to Treatment (SUMMIT) Trial aims to increase access to psychological treatment and implements a multi-stakeholder perspective to understand the needs/preferences of perinatal populations with symptoms of depression and anxiety. Specifically, this pragmatic, non-inferiority randomized effectiveness trial examines whether Behavioral Activation (BA) delivered via telemedicine is as effective as in-person treatment. However, due to COVID-19, the study suspended in-person BA sessions and completely shifted to telemedicine. To ensure BA remains widely accessible, the SUMMIT team strives to resume in-person treatment in the near future.

Objective: To gain perspectives of key stakeholders on the potential barriers and facilitators for SUMMIT participants to resume in-person BA sessions in a COVID-19 context.

Methods: A focus group discussion (1 hour) was conducted via Zoom with N=9 stakeholders, including patient advocates, nurses, clinicians, and researchers. Qualitative data was coded using NVivo and content analysis was performed to quantify frequently endorsed themes.

Results: The majority of stakeholders considered resuming in-person BA sessions to be a challenge amidst COVID-19, with more barriers than facilitators mentioned overall. Most commonly endorsed barriers that participants may face when attending in-person treatment included arranging childcare (n=8; 89%) and discomfort/fear of coming to the hospital (n=6; 67%). The most widely endorsed facilitators for resuming in-person treatment during COVID-19 were clearly communicating hospital and transportation safety precautions to participants (n=7; 78%) and conducting in-person sessions at an off-site location (n=6; 67%).

Conclusion: This study identified critical facilitators of resuming in-person BA sessions that can inform: (1) how to resume in-person BA sessions and (2) the development and implementation of strategies to make BA more patient-centered for perinatal populations during COVID-19.