2021 Summer Undergraduate Research Experience Poster Presentation Winners

1st Place

Evaluation of the Impact of COVID-19 on Arizona Community Health Workers (CHWs)

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Introduction

What are Community Health Workers (CHW)?
- Providing public health worker who is a trusted member of their community?

CHW COVID-19 Impact Surveys
- Created to assess the pandemic’s impact on CHW
- Included impact on COVID-19 risk, burnout, personal employment, employer support, employment status, and transitions on CHW
- Distributed in Texas, Arizona, New Mexico & Oklahoma in July 2020

Follow-up with a CHW Town Hall and second survey (2022)
- Town Hall Participant feedback on first survey and planing a visit to CHWs

Roles & Innovations

2021 CHW Town Hall Preparation
- Involved in project management & task-directed decisions
- Created email drafts, promotional materials, agenda, and presentation content

Innovation Tool - Question Phrasing
- Asking the right questions to stay organized
- What tasks are the most important for this week?

Manuscript Preparation
- Conduct literature review on a possible relationship in CHW between two survey variables
- Burnout - measured by the Professional Quality of Life (ProQOL) scale
- Personalized employer support

Innovation Tool - Recognition & Retention
- Metrics: Limited scoopup due to number of criteria
- Goals: Extended output due to alternative criteria and creative measuring

During the pandemic, Arizona CHWs displayed resilience to burnout and felt supported by employers

Aims & Methods

My CQRE research questions: In July 2020 of the COVID-19 pandemic, what levels of burnout and perceived employer support did Arizona CHW’s report?

Methods
- Surveys sent through CHW organizations
- Questions measured using ProQOL scale
- Run frequencies & descriptive statistics in SAS studio

Results

Demographics (n=59)
- 97.5% Female
- 82.1% White
- 44.8% of Hispanic, Latino, or Spanish origin
- Mean age - 44 years old (SD - 22.95)
- Most years of CHW experience - 7.63 years (SD - 7.32)

Results (cont’d)
- Only a small percentage of Arizona CHWs reported experiencing high burnout
- Arizona CHWs largely felt supported by their employers

Next Steps
- Town Hall: Conducted 2021 CHW Town Hall to get feedback on the ATW survey and give CHWs a visit in the area
- Survey 2021: Use the feedback to inform upcoming 2021 COVID-19 Impact Survey
- Dissemination of 2020 Arizona CHW COVID-19 Impact survey to help direct future CHW interventions
2nd Place (tied)

Barriers for Students with Disabilities in Medical Careers

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Introduction

2-4% of medical students have a disability compared to 20% of the US population. Previous research demonstrates several barriers for disability in medicine, including issues of accessibility, accommodations, and culture. No current study focused on students who left medical careers. These students with disabilities (SWD) have potentially faced other barriers not yet covered by research, which have prevented them from pursuing medical careers.

Goals

- Identify barriers causing SWD to leave medicine
- Evaluate potential strategies to address these barriers

Methods

1. Social Media Data: Scraping a python script was used to gather social media data. Data will then be qualitatively coded (not yet available).
2. Semi-structured interviews: Participants were recruited using social media, target enrollment of 30 (currently n = 6). Transcripts were qualitatively coded.

Results

Three general themes emerged:
1. Boons: circumstances that encouraged continuation in a medical career
2. General Barriers: circumstances that hindered but did not prevent continuation in a medical career
3. Causal Barriers: circumstances that directly caused the student to stop pursuing a medical career

- Boons: Medical professional support, Medical field exposure, Family and peer support
- General Barriers: Lack of university support, Judgment of accommodation, Disclosure to med schools
- Causal Barriers: Lack of medical field exposure, Lack of peer support, Financial burden for diagnosis, Technical standards

Discussion

Disability representation is not only an issue of autonomy, but of healthcare access. Medical professionals with disabilities provide higher quality of care, particularly to patients with disabilities. Therefore, we need people with disabilities in medicine.

The results of this study may help identify new strategies to improve representation, disabilty, and thus improve quality of care. Both the “causal barriers” and “boons” have been underestimated in efforts to recruit SWD to medicine. Focusing on eliminating “causal barriers” and supporting “boons” in future strategies could improve representation.

Innovations

- Changing POVs: Provided comprehensive list of current medical SWD. I sought the SWD who left medicine
- Induction/Deduction: I balanced deduction from previous disability literature theories with induction from individual interview observations
- Recombinations: I used social media scraping methods from other science disciplines

Next Steps

- Recruit more interview participants (n ≥ 20)
- Analyze social media data (n ≥ 200)
- Conduct survey of SWD (n ≥ 400)
- Identity and implement strategies

Acknowledgments, References
Human Trafficking Community Patterns in Alief, Houston

- High levels of human trafficking in Alief ISD due to community level factors
- Possible solutions include community support through education, safety net program, and resource guide

What is Human Trafficking?
Where a person is coerced or deceived into situations of prostitution, forced labor, or domestic servitude

Houston Human Trafficking
- 79,000 minors and youth are victims in TX
- 35,000 children attend school 1,000 ft within illegal trafficking businesses in Houston

METHODS
- Observational Analysis of Human Trafficking Patterns
- Community Walkthrough of Alief ISD

RECOMMENDATIONS
- Increase safety net program
- Social media awareness
- Community resource guide

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Collaborative Intervention Implementation: Determining Appropriate Reporting Strategies for Community Health Workers
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Lack of Reporting Standards for CHWs
Solution: Ni Kanos (CNAP)
- Community Health-Worker (CHW) delivered education, motivation, and navigation intervention
- Designed to increase breast and cervical cancer screenings, as well as HPV vaccinations among underserved Latinos

Project Background: Despite CHWs being responsible for collecting data at the individual level, there is no systematic standard for reporting findings back to CHWs.

Community-based research requires more effective communication with Community Health Workers

Feedback Gained through Listening Sessions
- CHWs in these organizations primarily want to know the health and screening outcomes of participants
- Prefer simple and colorful graphics visual aids
- Including anecdotes, testimonials, and outcome data in CHW reports can help reduce feelings of discouragement faced when addressing barriers for participants
- In addition to positive results, negative results should also be reported to allow CHWs to add areas of improvement
- Include legends and explain how data was obtained and what conclusions were based on
- Release findings should also be reported to community partners

Innovation in the Research Process
- Asking the Right Questions: What are innovative and appropriate ways of reporting findings back to CHWs among academic audiences?
- Breaking Frame: Data and findings should be reported via academic reports for researchers.
- Data and findings should also be reported back to CHWs using appropriate terminology and visuals.

Listening Sessions are Critical to Obtaining Feedback
- Conduct 4 listening sessions with a total of 30 CHWs from 3 organizations
- Ask open-ended questions to learn types of information CHWs are interested in
- Obtain feedback on ways to report findings back to CHWA
- Use feedback and insight gained to develop strategies of disseminating results back to CHWA
- Share results and seek additional feedback

Feedback can be Used to Create Future Reporting Norms
- Utilize findings to develop systematic ways of reporting findings back to CHWA
- Share feedback and emphasize the need of reporting findings back to CHWA and communities

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