INPLASY PROTOCOL

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Conflicts of interest:
None declared.

Effect of the PRECEDE-PROCEED Model on Health Programs; A Systematic Review and Meta-Analysis

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Review question / Objective: **This study aimed to systemically analyze previous studies that used the PRECEDE-PROCEED model and performed to examine the effectiveness and usefulness of health promotion intervention across different settings and populations.**
Condition being studied: **The eligibility criteria for studies were as follows: (a) studies containing participants of all ages, healthy people, and people with diseases in community and hospital settings; (b) intervention studies using the PRECEDE-PROCEED model, excluding those that used only the PRECEDE model and observational studies; and (c) studies containing health-related outcomes, with behavior, cognitive and physiological health, and quality of life as primary outcomes, as well as other predisposing factors for effective intervention based on the PRECEDE-PROCEED model.**

INPLASY registration number: This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 04 May 2022 and was last updated on 04 May 2022 (registration number INPLASY202250017).

INTRODUCTION

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containing health-related outcomes, with behavior, cognitive and physiological health, and quality of life as primary outcomes, as well as other predisposing factors for effective intervention based on the PRECEDE-PROCEED model.

METHODS

Search strategy: The search term combinations we used were [Precede-Proceed AND Model] OR [Precede-Proceed Model OR Precede Proceed] OR [Precede-Proceed AND health promotion] OR [Precede-Proceed AND community health planning] OR [Precede-Proceed AND population-based planning] OR [Precede-Proceed AND health program] OR [Precede-Proceed AND program evaluation] OR [Precede-Proceed AND intervention]. The databases used to search for the published articles were PubMed, Cumulative Index to Nursing and Allied Health Literature (CINAHL), PsycINFO, and Scopus; the databases used to search for the gray literature were ProQuest, Regional Information Sharing Systems (RISS), and OpenGrey.

Participant or population: Participants of all ages, healthy people, and people with diseases in community and hospital settings.

Intervention: Intervention using the PRECEDE-PROCEED model.

Comparator: Usual care.

Study designs to be included: Randomized controlled trials (RCTs) or quasi-experimental.

Eligibility criteria: (a) studies containing participants of all ages, healthy people, and people with diseases in community and hospital settings; (b) intervention studies using the PRECEDE-PROCEED model, excluding those that used only the PRECEDE model and observational studies; and (c) studies containing health-related outcomes, with behavior, cognitive and physiological health, and quality of life as primary outcomes, as well as other predisposing factors for effective intervention based on the PRECEDE-PROCEED model.

Information sources: The databases used to search for the published articles were PubMed, Cumulative Index to Nursing and Allied Health Literature (CINAHL), PsycINFO, and Scopus; the databases used to search for the gray literature were ProQuest, Regional Information Sharing Systems (RISS), and OpenGrey.

Main outcome(s): Health-related outcomes, with behavior, cognitive and physiological health, and quality of life as primary outcomes.

Quality assessment / Risk of bias analysis: Quality assessment was performed using the Mixed Methods Appraisal Tool (MMAT).

Strategy of data synthesis: We summarized study characteristics, including publication year, country, study design, participants' characteristics, and application of the PRECEDE-PROCEED model. For the meta-analysis, we entered the data into the Comprehensive Meta-Analysis (CMA) version 3.3 program based on each study design and outcome measurement (number of participants, mean, standard deviation, and p-value). The outcomes of the study were addressed using standardized mean difference (SMD) and 95% CI, as well as the p-values of SMDs. To reduce the effect of statistical heterogeneity on the evaluation, we used a random-effects model. Heterogeneity among studies was assessed using I2 to determine the heterogeneity of studies.

Subgroup analysis: Subgroup analysis was not conducted.

Sensitivity analysis: This study used a funnel plot to visualize publication bias and asymmetry.

Language: English.

Country(ies) involved: South Korea.

Keywords: Education; Health behavior; Health promotion; Knowledge; PRECEDE-PROCEED model.

Contributions of each author:

Author 1 - Junghee Kim - Author 1 prepared the first draft and contributed to study conception and design. Author 1 performed literature screening, data extraction, and quality assessment.

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