

INPLASY PROTOCOL

Protocol for a qualitative metasynthesis on response shift

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submission:** Data extraction.

Conflicts of interest:
None declared.

Review question / Objective: The aim of this qualitative metasynthesis is to describe and synthesize qualitative response shift studies. We will: 1. describe the studies, including their methods, and 2. synthesize results about response shift.

Condition being studied: The qualitative metasynthesis will include all qualitative studies on response shift, irrespective of the condition being studied. The type of health condition that each individual study focuses on (if applicable), will be extracted as a study-level code.

INPLASY registration number: This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 24 February 2023 and was last updated on 05 June 2024 (registration number INPLASY202320111).

INTRODUCTION

Review question / Objective: The aim of this qualitative metasynthesis is to describe and synthesize qualitative response shift studies. We will:
1. describe the studies, including their methods, and
2. synthesize results about response shift.

Rationale: Investigation into response shift has unfolded through the use of

quantitative approaches analysing patient reported outcome measures (PROM), and qualitative approaches elucidating response to PROMS as well as other qualitative methods. The former has received the lion's share of investigation, including previous systematic reviews. However, interpretive inquiry into subjective experiences and expressions of response shift may add alternative perspectives of response shift.

Qualitative work conducted in the field has not yet been synthesized. This work is needed to not only understand what has been done in the past, but also to leverage this legacy towards intentional future investigation.

Condition being studied: The qualitative metasynthesis will include all qualitative studies on response shift, irrespective of the condition being studied. The type of health condition that each individual study focuses on (if applicable), will be extracted as a study-level code.

METHODS

Search strategy: We used the same selection of papers as in the recent systematic review on response shift effects (<https://inplasy.com/inplasy-2022-9-0033/>) where searches were conducted in the following databases:

- a) MEDLINE, PSYCINFO, and CINAHL using the EBSCO interface;
- b) EMBASE using the OVID interface;
- c) Social Science Citation Index using the Web of Science interface; and
- d) Dissertations & Theses Global using the Proquest interface.

The searches were limited to English language and a date of publication before January 1, 2021. For the Social Science Citation Index, an additional limit was applied to exclude meeting abstracts. No other filters were applied to any of the searches.

All searches were conducted by searching for any of the following terms and abbreviations associated with response shift in all indexed fields: "response shift" OR "longitudinal measurement invariance" OR "retrospective bias" OR "longitudinal differential item" OR "longitudinal DIF."

Updated searches will be performed after analyses based on the above search have been completed.

Participant or population: There was no restriction on patient, participant, or population characteristics. Rather than a selection criterion, the characteristics of the health condition that each individual

study focuses on (if applicable), will be extracted as a study-level code.

Intervention: There was no restriction on interventions being studied.

Comparator: Due to the qualitative nature of the literature being sought, a comparator was not required for inclusion. The following categories will guide data extraction from each study: Aim 1: describe the studies, including their methods: 1. Qualitative aims, objectives, or research questions pertaining to response shift. 2. Definition of response shift used in the study. 3. Aspect or type of response shift studied. 4. Sample characteristics & size. 5. Qualitative methodology. 6. Approach to analysis. 7. Timing of qualitative data collection (including multiple collection points). 8. Recall period used for response shift. 9. Patient reported outcomes used for qualitative inquiry into response shift. 10. Interview questions (or other data collection strategies) pertaining to response shift. Aim 2: synthesize results about response shift, including: 1. Results related to aspect or type of response shift studied. 2. Alternative explanations of response shift.

Study designs to be included: We included all qualitative study designs, and all mixed methods designs where qualitative results could be isolated for extraction.

Eligibility criteria: The following exclusion criteria were sequentially applied in the following order: 1. Not reported in English. 2. Commentary, editorial, letter, case report, conference abstract (note: searches were conducted to locate studies resulting from relevant conference abstracts). 3. Type of article. 3.1. Conceptual or theoretical paper. 4. Type of study. 4.1. Qualitative approach not used. 4.2. Qualitative findings in a mixed methods study cannot be examined. 5. Study objective. 5.1. Response shift is not a major focus/objective of the qualitative study. 6. Study design. 6.1. Did not use a patient reported outcome measure, health related quality of life assessment, or an open

assessment (such as “How is your health?” or “How is your quality of life?”).

Information sources: The following databases were searched:

- a) MEDLINE, PSYCINFO, and CINAHL using the EBSCO interface;
- b) EMBASE using the OVID interface;
- c) Social Science Citation Index using the Web of Science interface, and
- d) Dissertations & Theses Global using the Proquest interface.

Main outcome(s): Due to the qualitative nature of the literature and that results will be written narratively, there are no outcomes per se. The aims of the qualitative metasynthesis are to:

1. describe the studies, including their methods, and
2. synthesize results about response shift.

Additional outcome(s): None.

Data management: We used the EPPI reviewer application to select studies based on our inclusion and exclusion criteria. We will also use this application to extract all relevant data from the selected studies. The titles and abstracts of each citation were double screened by two team members, both of whom were familiar with response shift. Full texts were subsequently retrieved for each citation identified as potentially relevant and each double screened by two team members. Disagreements were reconciled via consensus and in discussion with at least one other team member. Data extraction for each included study will be completed by one team member, and checked by a second team member. Ambiguities will be discussed among team members to achieve agreement.

Quality assessment / Risk of bias analysis: Mixed Methods Appraisal Tool (MMAT; http://mixedmethodsappraisaltoolpublic.pbworks.com/w/file/attach/127916259/MMAT_2018_criteria-manual_2018-08-01_ENG.pdf) will be completed for each included text. Following qualitative metasynthesis, quality appraisal is not intended to critique the scholarly merits of the research. Further,

texts will not be excluded based on quality appraisal.

Strategy of data synthesis: Qualitative metasynthesis encompasses an amalgamation or integration of findings. Analysis will begin with a close study of each text during data extraction to describe its design, methods, and results about response shift. These data will then be considered across studies. Following Sandelowski & Barroso’s (2007) approach to qualitative-meta synthesis, the strategy will include both “constant targeted comparison” as well as “imported concepts.”

Constant targeted comparison includes detailed analysis of similarities and distinctions of a targeted phenomenon, in our study, response shift. Findings from each study may be reduced to a set of abstracted statements. These statements may then be considered together, as a whole set of findings for a targeted comparison of the phenomenon.

Imported concepts are those that authors borrow from either empirical or theoretical literature to integrate (not just classify) findings. Imported concepts are often guided by prior knowledge of pertinent concepts. In our study, imported concepts may include aspects / types of response shift such as recalibration, reprioritization, reconceptualization, or alternative explanations of response shift such as recall bias, response bias, incapacity of verbalizing experiences or feelings, etc. Imported concepts may be mapped across the texts to synthesize the results about response shift.

These strategies of data synthesis will be iterative and recursive as the texts are read and re-read, and as authors ask questions of the texts, each other, and search for similarities, differences, and new possibilities for interpretive integration of response shift.

Subgroup analysis: None.

Sensitivity analysis: Due to the qualitative nature of the synthesis, sensitivity analysis is not planned.

Language restriction: Only documents written in English are included in the synthesis.

Country(ies) involved: Canada, United Kingdom, The Netherlands, France.

Other relevant information: This work is part of The Response Shift-in Sync Working Group Initiative.

Keywords: Response shift; qualitative; patient-reported outcomes; systematic review; qualitative metanalysis; interviews; focus groups.

Dissemination plans: The results will be submitted to an international peer-reviewed journal.

Once the article is accepted for publication, the data will be made available through the EPPI system.

Contributions of each author:

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