Author’s response to reviews

Title: Personal goal-setting among women living with breast cancer: protocol for a scoping review

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Author's response to reviews:

Thank you to both of the reviewers for taking the time to review our manuscript. We appreciate all of the suggestions for improvement that you have made, and have respond to each of them point by point below.
Reviewer reports:

Reviewer #1: The manuscript under review, entitled "Personal goal-setting among women living with breast cancer: protocol for a scoping review," describes the protocol for a systematic review of personal goal setting in women with breast cancer. The authors are commended for seeking to conduct a systematic review on this important and emerging topic in patient-centered care. In my reading of the manuscript, I had several suggestions to strengthen the paper.

Abstract:

1. In the Abstract, the authors state the aim of the scoping review (page 2, lines 29-30). It would also be beneficial to include the aim of the current manuscript. Otherwise, the reader may not ascertain that the current study is a description of the protocol, rather than the complete systematic review.

Response: We agree and have added a clause to describe the protocol (page 2, lines 28-29).

Introduction:

1. Similar to my comment regarding the Abstract, it is important to clearly state at the end of the Introduction that the current manuscript describes the protocol of the review, rather than the complete systematic review with results.

Response: We have clarified that the manuscript describes a protocol, on page 5, line 103.

2. During the Introduction, the authors focus their attention on intervention studies which include goal setting as part of the intervention. Further, 2 of the 4 research questions are specific to intervention studies. Given this focus, the authors might consider focusing all of the research questions on intervention studies. For example, question 1 could be revised to state "How many intervention studies…" (page 5, line 100). Accordingly, the authors might consider revising the title of the paper to include the word "intervention." If this is not the intended purpose of the review, the authors might consider revising the language of the Introduction and the research questions to be broader.

Response: We have made significant changes to the introduction (pages 3 - 5, lines 52 - 105) and to the Abstract (page 2, lines 28-29) to better reflect the scope and purpose of this study, which is to conduct a broad scoping review of studies related to breast cancer and goal-setting. Our overall scope is broad rather than the narrower focus on interventions that our introduction might
have implied, although an identification of goal-setting interventions remains one of our objectives.

Response: We have also made a minor change in the Results section, to indicate that not all studies will have interventions (page 13, line 288).

Methods

1. The inclusion criteria seems to contradict the authors' description of the selection process. For example, on page 8 (lines 162-165), the authors describe searching for conference abstracts and grey literature. However, the inclusion criteria clearly state that the articles must be published, full-length articles and excludes theses, dissertations, conference abstracts, and other grey literature. If these papers will ultimately be excluded, why go to lengths to find them?

Response: We appreciate your comment. A wide search strategy reduces the likelihood of missing relevant articles in our search. Because our goal is to identify all of the published articles related to our topic, we decided to cast a wide net in our search strategy. In our experience, we have found that conference abstracts, theses and dissertations can lead to related full-length, published articles that somehow but nevertheless do not show up in the initial search. We have edited our methods section to be a little clearer, and better link the sections on search strategy and literature saturation to the eligibility criteria (page 7, lines 152-155).

Reviewer #2: It is widely recognized that setting and pursuing personally relevant goals provide life with meaning and is of utmost importance for a person's wellbeing. So, I fully endorse the relevance of the topic under investigation, i.e. personal goal-setting among women living with breast cancer'. However, my main concern after reading the paper is that it is not clear to me what the authors want to investigate, what questions they want to get answered.

Background

I think the background would benefit from some rewriting. Some suggestions for improvement:

- The first two paragraphs could be integrated. Furthermore, in these paragraphs the authors focus on patient-centered care and write several sentences on it, but basically only one (part) of those sentences is relevant in the context of this paper, i.e. the sentence in which they link patient-centered care to the goal system. I would suggest to rewrite the part on patient-centered care, by giving a short definition of patient-centered care and then more clearly explain why and how the goal system is relevant in the context of patient-centered care.
Response: This is a helpful insight and we have revised the section on patient-centered care as suggested (pages 4-5, lines 93-99).

- Personal goals are things a person wants to achieve, maintain or avoid. It is now written as if people only have approach goals, but people also have other types of goals ('maintain good health', 'avoid getting nauseous from chemotherapy'). I think this nuance needs to be described.

Response: We have edited the relevant section (page 3, line 54) to remove the insinuation that goals can only have an approach direction.

- In line 86-87 the authors state that effective, existing goal-setting interventions for women with BC need to be identified. If you want to achieve that, I would think you need to identify existing and commonly used interventions that incorporate goal setting as an intervention technique, irrespective of whether they have been used in breast cancer or other types of cancer. So, investigate to what extent Cognitive Behavioral Therapy, Acceptance and Commitment Therapy, Mindfulness, etc. etc. use these techniques. Why did the authors not choose that approach?

Response: Upon review, we agree that our first draft implied a heavier focus on interventions than we intended. We chose to focus on interventions used in breast cancer because we are interested in goal-setting as a more general topic, and as it relates to that particular population. We have edited the introduction (pages 3-5, lines 52-105) to reflect this focus, and removed the sentence related to identifying effective goal-setting interventions.

- In line 92/93 the authors write that they are only interested in breast cancer, without giving a clear argument on why they only want to focus on this type of cancer. Do they expect goal setting (interventions) to be different for breast cancer patients then for other types of cancer? Or is the decision practical, in that it would be too wide a scope for the review to include all types of cancer?

Response: We agree and have clarified and expanded our argument for focusing on breast cancer (page 3-4, lines 59-82).

- The objective of the review, as described in line 97-99, is much broader than I expected based on the background. Based on the background I thought the authors wanted to investigate the use of personal goal setting in interventions, but when I read the objective and
aim 1, it seems that the authors want to give an overview of all empirical studies (also descriptive) on personal goal setting. That is a very different aim.

Response: We have made significant changes to the introduction (pages 3 - 5, lines 52 - 105) to reflect the broader scope and purpose of this study, which, as the reviewer mentioned, is to conduct a broad scoping review of studies related to breast cancer and goal-setting rather than on interventions specifically.

- Aims 3 and 4 don't follow logically from the background either. Why would you want to focus on the instruments used to assess goals if your primary aim is to provide an overview on goal-setting interventions?

Response: We hope that our purpose to characterize the landscape of research related to personal goals among women with breast cancer is clearer now that we have revised the introduction. Pursuing a broader range of objectives enables us to characterize existing research on our topic of interest.

Overall, I think including all four aims is way too much for this systematic review, especially because they differ widely. I would suggest to narrow the focus and describe findings comprehensively. Furthermore, link the background to the research aims!

Response: This is a valid question, and we hope that we have begun to answer it in our response above. We felt that it was reflective of a scoping review to ask broader questions to describe important components of studies related to this topic and population. A stronger link between the introduction and objectives was also suggested by reviewer #1; we agree with this suggestion and have made significant revisions to the introduction (pages 3 - 5, lines 52 - 105) to better align with the objectives of the review.

Methods

When I read the methods section, my main concern was that the authors want too much. E.g. Why include all outcomes and not only focus on psychological outcomes, which would be most logical from a theoretical perspective?

Response: We hope that our explanation above helps to illuminate our intentions in this review. We hope that our interest in and intent to characterize (scope) the landscape of research related to personal goals among women with breast cancer is clearer now that we have revised the introduction. The broader range of objectives enables us to ask a variety of research questions to broadly describe and characterize existing research on our topic of interest.
Another concern is that the authors state that they want to focus on personal goals, but nevertheless aim to include studies that focus on one or two life domains. Personal goals refer to a person's goal system, including goals in all domains of life. This implies that the authors cannot include studies that focus on only one or two domains of life. Studies on treatment goals should be excluded (which is the major bulk of literature in rehabilitation).

Response: We understand your concern, but we feel there is value in including all studies related to this topic, even if they focus on a limited number of domains. We plan to distinguish between studies which limited the number of domains compared to those that did not in our results section, and have made a minor reflection (page 13, line 291) to reflect that. We feel that it is valuable to include studies regardless of the number of domains, as we can learn from the methods of previous studies. This information can help us to understand and characterize the breadth of existing research on the topic. It can also help future researchers to easily identify knowledge gaps in the literature.

Thank you again for taking the time to review and offer suggestions to improve our manuscript. We hope we have addressed your comments thoroughly.