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 a second time. We appreciate your suggestions for improvement and have responded to each of them point by point below.
Reviewer #1: Overall, the authors addressed my comments and concerns. I have one minor concern that remains. In the Abstract, the sentence in lines 34-36 still suggests a focus on intervention studies, rather than broadly reviewing all relevant studies. It would be helpful to revise this sentence if you are taking a broad approach.

Response: We agree and have amended the abstract to be more precise about the types of studies included (lines 35 and 38). Thank you for this comment.

Reviewer #2: I see that the authors did put some effort into the revision, but to be honest I am not really satisfied with how it worked out and how they addressed my comments. It still is difficult to follow, the rationale is still not clear, and it is written too imprecisely. the link between the introduction and the objectives is still not strong.

Response: We thank the reviewer for their helpful additional comments and for the opportunity to add clarification. We have revised the background (lines 70 - 121) to improve clarity and precision. A complete explanation of adaptations made is described below in response to the reviewer’s other helpful points. As this is a scoping review, the aims are deliberately broad as we aim to map the literature.

Although the authors have removed the reference to 'intervention' in the introduction, they continue to refer to 'intervention studies' in the methods, results and discussion sections.

Response: We have revised the introduction (lines 75 – 90, 94, 121) and abstract (lines 35 and 38) to make it less focused on goal setting interventions per se but as this is a scoping review protocol, our aim is to describe our plans to conduct a review that will chart the literature (including goal setting interventions when it is a primary component of the intervention) which we have also clarified (line 41).

Furthermore, although they do provide a rationale for only including breast cancer, I don't think it is a strong rationale, especially because the argument they use leads to the conclusion that BC patients probably report goals with different content than patients with other types of cancer. Goal literature, however, is pretty clear on the fact that (very relevant if you want to think about goal interventions) the content of a goal is not the most relevant, but it is about the characteristics of the goal: is it attainable, personally important etc that impact wellbeing outcomes etc.

Response: Thank you for the opportunity to clarify our rationale. This scoping review is being conducted as part of a larger body of work to support women with breast cancer. Our aim is to understand more about their goals in order to improve care. We agree that our interest is less
about the differences in goals between various types of cancer and more about focusing on one type of cancer so that the information is potentially more useful for stakeholders designing interventions to support women with breast cancer. We have revised the introduction/rationale to be more straightforward and precise (lines 70 - 121).

Finally, I don't think the argument they give about why they also want to include studies that only have focused on treatment goals is strong. Treatment goals differ fundamentally from personal goals, the terms also come from very different literatures. Although I think it still is a bad decision to include studies that focus on treatment goals only, the authors should at least acknowledge that treatment goals are fundamentally different from personal goals.

Response: Our rationale for including treatment goals concerns the reality of a cancer diagnosis and experience. It is likely that any treatment goal may ultimately become a personal goal given how life consuming a cancer journey can become, or at the least become interwoven with other personal goals over time. Our purpose with a scoping review is to chart the literature. Including studies that only focus on treatment goals will allow us (as the reviewer rightly points out) further to comment on the state of the literature as it stands, and perhaps make calls for more studies that do not focus only on treatment goals but also the wider system of personal goal pursuit.

Thank you again for your additional comments and the opportunity to provide greater clarity in our protocol.

Sincerely,

Andrea Chow

On behalf of authors