Scoping review protocol: Understanding patients' and healthcare providers' perceptions of healthcare acceptability of HIV, TB and maternal healthcare services

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Abstract

Healthcare acceptability is critical in global debates for improving service delivery across all health specialities. The concept of healthcare acceptability reflects interactions between patients and healthcare providers and is expressed through attitudes, beliefs, perceptions, experiences and expectations. These terms are often used to describe human behaviour in psychology science. The concept of healthcare acceptability is widely used in healthcare, particularly in psychology literature, and is still ill-defined and poorly conceptualized. This scoping review will explore and describe the depth and breadth of evidence on healthcare acceptability definitions, conceptual frameworks and applications through the lens of patients and healthcare providers in HIV, TB and maternal healthcare services. We will search electronic databases and grey literature, guided by a search strategy in accordance with eligibility criteria. Two researchers will independently screen and chart data from retrieved and included articles. An agreement of 80% between reviewers' results will be considered appropriate and a third reviewer will resolve any conflict between them. The results will be presented in graphical, charted or tabular form accompanied by a summary linking the results to the objectives. The researchers will discuss and disseminate important findings, limitations and propose potential implications and future research projects.

Keywords

Acceptability, healthcare, HIV, TB, maternal health, patient-provider interactions, patients' perceptions, providers' attitudes, psychosocial stressors

Main text

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Introduction

Healthcare acceptability is an important topic in psychological and public health debates for improving healthcare delivery (Sekhon et al., 2017, Cameron et al., 2017, Shaw et al., 2014). The influence of healthcare acceptability is gaining momentum across health sciences boundaries with a growing body of evidence in psychology, public health and health implementation science (Valiente et al., 2021, Harichund et al., 2019, Bucyibaruta et al., 2018, Sekhon et al., 2018). Acceptability of healthcare is not a well-defined term and remains poorly conceptualised (Bucyibaruta et al., 2018, Sekhon et al., 2018). Therefore, it certainly substantiates additional research to elucidate the concept of healthcare acceptability.

In the early 1980s, healthcare acceptability or cultural access was first referred to as one of the dimensions of access to healthcare, which also includes affordability or financial access, and availability or physical access (Silal et al., 2012, McIntyre et al., 2009, Penchansky and Thomas, 1981). Originally, healthcare acceptability was defined as “*the best fit fulfilment of healthcare expectations between the patient and the healthcare system*” (Silal et al., 2012, Penchansky and Thomas, 1981). The definition of healthcare acceptability has subsequently

been refined but there is still no universally accepted definition or conceptual framework for health professionals.

Various psychosocial stressors affect the quality of received and / or offered care resulting in healthcare acceptability being widely reported among patients and health professionals involved in HIV, TB and maternal health services (Ashaba et al., 2017, Mohangi and Pretorius, 2017, Bhembe and Tsai, 2019, Bender et al., 2020, Naidoo et al., 2020). Due to the lack of a concrete definition, healthcare acceptability has been inconsistently applied in a wide range of healthcare services (Sekhon et al., 2018). While different healthcare services share many characteristics, they do have distinctive aspects. Here, we will review the current definition and conceptual frameworks of healthcare acceptability in relation to specific fields of healthcare namely HIV, TB and maternal health services. We will explore and describe the depth and breadth of evidence on healthcare acceptability definitions, conceptual frameworks and applications through the lens of patients and healthcare providers in HIV, TB and maternal healthcare services.

Methods

This study is part of a bigger PhD research project applying mixed methods including a scoping review as approved by the Faculty of Health Sciences Research Ethics Committee, University of Pretoria (No: 545/2019). We specifically selected HIV, TB and maternal health services to clarify the concept of healthcare acceptability in general and how it applies to these specific health services. This protocol is presented for registered report for in-principle acceptance (IPA). It is registered on the Open Science Framework (OSF) to increase research transparency and to avoid unintentional duplication of reviews. The review will be executed according to the registered reports guidelines and will be subject to ethical and policy considerations of Meta-Psychology journal to which this paper is submitted for the IPA.

Study design

This study will apply the scoping review methodological framework provided by Arksey and O'Malley (Arksey and O'Malley, 2005), which has been adapted by different authors to improve its usefulness and consistency in health research and practice (Anderson et al., 2008, Davis et al., 2009, Levac et al., 2010, Dijkers, 2015, Tricco et al., 2018). Scoping reviews are widely recognised as an appropriate method to organise, summarise and identify gaps in existing literature to answer broader research questions (Dijkers, 2015, Armstrong et al., 2011). This scoping review will be conducted in six stages, namely (i) identifying the research question, (ii) identifying relevant studies, (iii) selecting eligible studies, (iv) charting the data, (v) collating, summarising and presenting results, and (vi) consulting with experts in the field [optional] to improve the utility and practical implication of our findings (Arksey and O'Malley, 2005). This review will also be guided by the framework developed by the Joanna Briggs Institute to enhance the methodological quality of scoping reviews (Tricco et al., 2018).

Identifying the research questions

This scoping review will explore the evidence on healthcare acceptability definitions, conceptualisation and application from perspectives of patients and healthcare providers in HIV, TB and maternal healthcare services. Thus, we will seek to answer the following questions:

1. How is the concept of healthcare acceptability defined and conceptualised in the literature on HIV, TB and maternal health services?
2. How is the concept of healthcare acceptability specifically applied to HIV, TB and maternal health services?
3. Which practical implications can be drawn from the concept of healthcare acceptability?

Identify relevant studies

We will thoroughly search the literature to identify relevant studies to comprehensively answer the research questions. The principal investigator (PI) and three co-authors will independently search for relevant articles from existing online databases including Web of Science, MEDLINE/PubMed, Cochrane Library, Google Scholar, etc. The third author is an information specialist (IS) in an academic library and was recruited to ensure search reliability. The researchers will use snowballing to identify additional studies from retrieved studies by checking their reference lists and ‘cited by’ articles. We will also search grey literature such as dissertations/theses (ProQuest Dissertations & Theses Global), conference abstracts (EMBASE Conference Abstracts, Conference Proceedings), PowerPoint presentations, magazines, health organisations websites, department of health in different countries, Google websites and unpublished work on the topic. This process will be iterative in nature until we have identified 1500 articles before we then implement the next stages of the scoping review. We might search for further relevant studies as per consensus among the researchers or recommendations from consulted experts.

Selection of eligible studies

Eligible studies will be selected using an “open” strategy, where we will include all sources on acceptability of, HIV, TB and maternal healthcare. We will only include studies published in English, which is the common language of the researchers who will be screening the retrieved articles. Studies will not be excluded based on study design and year of publication. Similarly, the methodological quality appraisal or bias risk assessment for included articles will not be considered in line with scoping review methodology (Armstrong et al., 2011).

Eligibility criteria

We will screen retrieved studies using carefully developed eligibility criteria to ensure that we include studies that are relevant to the research questions. Eligibility criteria have been determined using Population-Concept-Context (P-C-C) criteria as depicted in table 1.

Table 1: Eligibility criteria for selecting articles on healthcare acceptability in TB, HIV and maternal healthcare services

CRITERIA	DESCRIPTION
Population (stakeholders)	<ul style="list-style-type: none"> • Patients aged 18 years and older seeking HIV, TB and maternal healthcare services • Healthcare providers involved in HIV, TB and maternal healthcare services
Concept	<ul style="list-style-type: none"> • Acceptability of healthcare
Context	<ul style="list-style-type: none"> • HIV • TB • Maternal healthcare

Exclusion criteria

This scoping review is part of a larger PhD study already approved by the Research Ethics Committee. We will thus exclude articles reporting on children younger than 18 years old and populations with mental health conditions due to ethical considerations in assessing their viewpoints on acceptability of healthcare.

Search strategy

Drawing on the specified eligibility criteria, the PI has developed a search strategy using specific keywords or Medical Subject Headings (MeSH) terms in various combinations to effectively identify relevant studies (Table 2). The two researchers involved in the search, the information specialist and the PI will conduct a pilot search to check the appropriateness of the strategy on different online databases. Table 2 displays the search strategy.

Table 2: Search strategy for selecting articles on healthcare acceptability in TB, HIV and maternal healthcare services

Eligibility criteria	Description
Population	Keywords or MeSH terms “patients”
	<i>Synonymous or proxy words</i> “Clients”,
Concept	Keywords or MeSH terms “Acceptability of healthcare”
	<i>Synonymous or proxy words for acceptability</i> “Acceptable / unacceptable”, “respectful / disrespectful”, “trust / distrust”, “supportive / unsupportive”, “caring / uncaring”, “perception/experience”, etc.
	Keywords or MeSH terms “HIV”
	<i>Synonymous or proxy words</i> “AIDS”, “ARVs”, “HAART”, etc.
Context	Keywords or MeSH terms “TB”
	<i>Synonymous or proxy words</i> “Anti-TB drugs”, “TB regimen”, etc.
	Keywords or MeSH terms Maternal healthcare
	<i>Synonymous or proxy words</i> Pregnancy”, “labour”, “delivery”, “post-partum”, “maternal healthcare services” “antenatal care”, “PMTCT”, “mental health in pregnancy”, “breastfeeding”, etc.
Boolean operators	“OR”, “AND”, “NOT”

We may refine the search strategy by using synonymous and/or proxy words to maximise identification of publications related to acceptability of healthcare.

Level one screening

After the initial search, retrieved articles will be exported and merged into a single Endnote library. We will remove the duplicates and import them into Rayyan software for level one screening. Two researchers will independently screen the titles and abstracts of identified sources. An agreement level of 80% between the two independent researchers will be

considered appropriate during pilot screening of the first 150 articles before screening the rest of the retrieved studies. The screening process will be blinded to avoid any bias. A third reviewer will resolve any conflict between the two independent researchers.

Level two screening

Once the titles and abstracts have been screened, the included articles will be exported from Rayyan to Endnote, where full-texts will be attached to each entry. The Endnote library will be imported into Rayyan software for full text screening. The screening process will be blinded with an agreement level of 80% which will be considered appropriate between two independent researchers. A third reviewer will resolve any conflict arising during the full-text screening.

Searching database

The PI has developed a search database to summarise the historic search. Table 3 shows the searching database.

Table 3: Searching database to document the historic search for selecting articles on healthcare acceptability in TB, HIV and maternal healthcare services

Search ID#	Dates	Number of studies retrieved (excluding duplicates)	Number of studies selected after screening level one	Number of studies included after screening level two
S#1				
S#2				
S#3				
S#4				
S#5				
Etc.				

Charting the data

Data extraction from included studies will be organised to present a coherent and explanatory summary of relevant information aligned with the research questions and objectives. The charting form was developed to record the key information extracted from included articles. The google form will be used for data charting that will be conducted by two independent researchers. An agreement level of 80% between the researchers will be considered appropriate during the charting pilot of 30 articles before continuing with data charting of the rest of the included articles. Any conflict amongst the two researchers will be resolved by a third reviewer. The answers in a google sheet will be exported into Stata software for descriptive analysis. Table 4 describes pre-defined charting form.

Table 4: Charting form

Data heading	Description
Title of study	Title of the article or study
Author/s	Name of author/s
Publication year	Year that the article was published
Study design	<ul style="list-style-type: none"> • Qualitative • Quantitative • Scoping review • Systematic review • Meta-analysis
Publication type	<ul style="list-style-type: none"> • Journal

Data heading	Description
	<ul style="list-style-type: none"> • Book • Website • Conference proceedings • Unpublished • Other (specify)
Keywords	Key words used by author/s
Study settings	<ul style="list-style-type: none"> • Country(ies) where the study was conducted • Not applicable
Context	<ul style="list-style-type: none"> • HIV • TB • Maternal health
Definition of healthcare acceptability	Author/s provide/s the definition of healthcare acceptability (Yes or No)
Application of healthcare acceptability definition	Author/s apply/s the definition of healthcare acceptability in general (Yes or No)
Type of interactions	<ul style="list-style-type: none"> • Patient-community interactions • Patient- provider interactions • Patient-health systems/policy interactions • Provider-community interactions • Provider-health systems/policy interactions
Stakeholders' viewpoints expressed	<ul style="list-style-type: none"> • Patients • Providers

Data heading	Description
Components of patient-community interactions	<ul style="list-style-type: none"> • Support from family (yes or no) • Support from community (yes or no) • Support from other patients • Stigma from family (yes or no) • Stigma from community (yes or no) • Stigma from other patients • Other (specify)
Components of patient- provider interactions	<ul style="list-style-type: none"> • Language barrier • Respecting privacy • Talking to health worker in private • Busy health worker • Being shouted at • Health worker not respecting other patients • Health worker not respecting me • Other (specify).
Components of patient - health systems and policy interactions	<ul style="list-style-type: none"> • Dirty facilities • Satisfied with received services • Referred for follow up care • Other (specify)
Components of provider-community interactions	<ul style="list-style-type: none"> • Support from family (yes or no) • Support from community (yes or no) • Support from other colleagues • Harassment from family (yes or no)

Data heading	Description
	<ul style="list-style-type: none"> • Harassment from community (yes or no) • Harassment from other colleagues • Other (specify)
Components of provider - health systems and policy interactions	<ul style="list-style-type: none"> • Dirty facilities • Pleased with service organisation • Harassment from management • Satisfied with complaint policy • System to deal with burnout • Other (specify)
Practical implications	<ul style="list-style-type: none"> • Yes (if yes; specify) • No
Comments	
Conclusion	<ul style="list-style-type: none"> • Healthcare acceptability • Proxy term

Collating, summarising and reporting the results

To align the study selection with the research questions, the results will be reported in line with the Systematic reviews and Meta-Analyses extension for Scoping Reviews (PRISMA-ScR) (Tricco et al., 2018). The PRISMA-ScR flow diagram will be used to demonstrate the process of including relevant literature, from identifying articles to retaining articles that fulfil all eligibility criteria (Figure 1). The results of this scoping review will be presented graphically, in the form of charts and/or tables. The results will be narratively summarised to illustrate the link between results and research questions.

Figure 1: PRISMA-ScR flow diagram

Consultation with experts

We plan to consult with experts in the field through emails, one-to-one consultative virtual meetings or through an Open Science Framework (OSF) to regularly record thoughts, opinions and experiences from experts on this topic. We will engage various experts in the field of healthcare acceptability to enhance the findings from the scoping review and to obtain additional references. By consulting with experts, we will glean more insight into our results, identify additional relevant articles and formulate implications for future research, policy decision-making and strengthening of health system practices.

Discussion

Through this scoping review, we will identify gaps in the literature on acceptability of healthcare focussing on HIV, TB and maternal healthcare. We will explore the conceptual understanding of acceptability from the aforementioned healthcare services as well as the implications for practice. The main results will be discussed in the context of the eligibility criteria (population, concept and context) and the available evidence will show the current understanding of acceptability of healthcare in HIV, TB maternal healthcare services. The discussion will consider the viewpoints of relevant stakeholders, namely patients and healthcare providers. The results will be interpreted to address the objectives and research questions. The authors will also suggest next steps, such as systematic review or meta-analysis, informed by the findings of this scoping review.

Strengths and limitations

Strengths

Scoping review is a suitable evidence synthesis method to answer broad research questions. This project will be guided by a thoughtful and rigorous protocol. Bias will be avoided by pre-defining eligibility criteria, formulating a search strategy and creating a data charting form. Scoping reviews are a transparent and replicable way to review evidence to identify gaps in the literature and shed some light on the how acceptability of healthcare is defined and conceptualised. This method is appropriate to ascertain implication practices from the acceptability of healthcare concept and suggest future research studies such as systematic review or meta-analysis to narrow the investigation of this concept.

Limitations

This study is conditional on Ethics Approval Reference No: No: 545/2019 for a PhD research project on adult population. Thus, we will exclude studies on healthcare acceptability related to younger and mental disabled population. Another limitation is that we will omit studies on acceptability of healthcare published in languages other than English. This exclusion may result in omission of important studies on this topic.

Data Availability

All data generated by this scoping review will be published to maintain a standard of reproducibility and transparency. We will publish the databases searched, the included studies and the excluded studies, along with the reasons for exclusion. All the data will be will be available on OSF repository.

Author Contributions

Dr Joy Blaise Bucyibaruta is the PI and corresponding author. He is the project administrator and he was involved in conceptualization, data curation, formal analysis, investigation, methodology, writing — original draft preparation, and subsequent corrections —, editing, formatting and approval of article submission.

Ms Leah Maidment and Mr Carl Heese are the co-authors of this study. They have been recruited to get involved in the conceptualisation of this project, literature search, level one and two screening, data charting, proof-reading and approval of article submission.

Prof Doriccah Peu and Prof Lesley Bamford are the supervisors of the PI. They read the article and provided suggestions on how to improve the article.

Prof Annatjie van der Wath read an article as an external researcher and provided some suggestions on how to improve the article

Ms Estelle Grober is an information specialist and she is involved in the literature search. She will also assist the PI to resolve the conflicts in screening and data charting between two researchers to ensure the search's reliability.

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Conflict of Interest Statement

Authors declare no conflict of interest.

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