

## Therapeutic writing for people with long-term conditions

### Introduction

The aim of the HTA programme is to ensure that high quality research information on the effectiveness, costs and broader impact of health technologies is produced in the most efficient way for those who use, manage, provide care in or develop policy for the NHS. Topics for research are identified and prioritised to meet the needs of the NHS. Health technology assessment forms a substantial portfolio of work within the National Institute for Health Research and each year about fifty new studies are commissioned to help answer questions of direct importance to the NHS. The studies include both primary research and evidence synthesis.

### Research Question:

***What is the clinical and cost-effectiveness of expressive, reflective or creative writing in improving the well-being of those with long-term physical or mental health conditions?***

- 1 **Intervention:** Expressive, reflective or creative writing (as an adjunct to on-going care). Consideration should be given to whether the intervention could plausibly be delivered in the NHS. New media should be included if possible.
- 2 **Patient group:** Patients with long-term physical or mental health problems or both.
- 3 **Setting:** Any, although the community is the main setting of interest.
- 4 **Control or comparator:** Treatment as usual or other appropriate control.
- 5 **Study Design:** An evidence synthesis by systematic review of the best available evidence into the benefits of therapeutic writing on well-being. Where possible, findings should be analysed by health condition, severity and duration. Researchers should explore how or why the intervention appears effective. Researchers should also explore the effectiveness of interventions involving differing interactions with therapists or other people, for example, the extent to which a therapist reads or interprets the writing. An economic model would be welcome if the available data enables this to be done.
- 6 **Important outcomes:** Psychological symptoms; quality of life.  
**Other outcomes:** Health care utilisation; mood; psychological and social functioning; symptoms from any underlying condition; disability; cognitive outcomes; adverse effect; mortality; coping; sleep quality; adherence to other therapies; costs.

### **Background information for potential applicants:**

*Expressive writing is a form of emotional disclosure that may have a positive impact on psychological health. Typically, expressive writing involves writing about a stressful or traumatic experience. The simple hypothesis being that the process of writing enables the subject to organise facts relating to an overwhelming experience, which in turn helps resolve them. Although improvements in health outcomes have been demonstrated in both healthy and clinical populations, findings are sometimes contradictory.*

*Recently, there has been renewed interest into the possible health benefits of therapeutic writing on a variety of long-term health conditions such as cancer, post-traumatic stress disorder, HIV, asthma, arthritis and eating disorders. Therapeutic writing may include reflective or creative writing, such as poetry, as well as expressive writing. A wide systematic review is needed to assess the relative effectiveness of therapeutic writing on health and to consider its role within the on-going emotional support offered by the NHS to patients with long-term health conditions.*

## **Making an application**

The NIHR Health Technology Assessment programme is funded by the NIHR, with contributions from the CSO in Scotland and WORD in Wales. Researchers from Northern Ireland should contact NETSCC to discuss their eligibility to apply.

If you wish to submit a proposal on this topic, complete the on-line application form at <http://www.hta.ac.uk/funding/standardcalls/index.shtml> and submit it on line by **6<sup>th</sup> October 2011**. You need to send a copy of the application form with original signatures, along with a detailed project description, to the HTA Commissioning Manager at the National Coordinating Centre for Health Technology Assessment, Alpha House, Enterprise Road, Southampton Science Park, Chilworth, Southampton, SO16 7NS.

Your full proposal will be assessed by designated board members, alongside other applications submitted in the same topic area. A maximum of three proposals will be taken forward for peer review by external referees, and subsequent consideration by the HTA Commissioning Board at its meeting in January 2012.

In line with the government's transparency agenda, any contract resulting from this tender may be published in its entirety to the general public. Further information on the transparency agenda is at: <http://transparency.number10.gov.uk/#>

***Applications received electronically after 1300 hours on the due date will not be considered.***

***Please see GUIDANCE ON APPLICATIONS overleaf.***

## Guidance on applications

### Methods

Applicants should demonstrate knowledge of current research in the field and of systematic review methods and state how these would apply to the question posed. Valid and reliable methods should be proposed for identifying and selecting relevant material, assessing its quality and synthesising the results. Guidance on choice of appropriate methods is contained in NHS CRD Report *Systematic Reviews: CRD's guidance for undertaking reviews in health care (third edition)* ([http://www.york.ac.uk/inst/crd/systematic\\_reviews\\_book.htm](http://www.york.ac.uk/inst/crd/systematic_reviews_book.htm)). Where policy implications are considered, the emphasis should be on assessing the likely effects of a range of policy options open to decision makers rather than a judgement on any single strategy. Where epidemiological modelling or economic evaluation is required, the range of uncertainty associated with the results should be assessed. In the assessment of cost-effectiveness, further data collection may be required to estimate resource use and costs. If there is evidence that the ratio of costs and benefits may differ between readily identifiable groups, applicants are encouraged to state how they will identify these differences.

### Cochrane

Applicants wishing to produce and maintain a Cochrane systematic review from a HTA commissioned systematic review should make the case in their proposal. This will need to include the approval of the relevant Cochrane Review Group ([www.cochrane.org](http://www.cochrane.org)). Any additional costs associated with the initial preparation of a Cochrane review should be included in your project proposal. Maintenance costs cannot be met.

### Public involvement in research

The HTA programme recognises the benefit of increasing active involvement of members of the public in research and would like to support research projects appropriately. The HTA programme encourages applicants to consider *how* the scientific quality, feasibility or practicality of their proposal *could* be improved by involving members of the public. Examples of how this has been done for health technology assessment projects can be found at <http://www.hta.ac.uk/PPIguidance/>. Research teams wishing to involve members of the public should include in their application: the aims of active involvement in this project; a description of the members of the public (to be) involved; a description of the methods of involvement; and an appropriate budget. Applications that involve members of the public will not, for that reason alone, be favoured over proposals that do not but it is hoped that the involvement of members of the public will improve the quality of the application.

### Updating

It is the policy of NETSCC, HTA that all search strategies undertaken as part of evidence synthesis/secondary research projects must not be more than 12 months out of date when the draft final report is submitted. We expect that most projects will manage to bring their searches up to date prior to analysis and writing up. As research funders we are aware that exceptional circumstances can apply that would not allow this to be case but this must be the exception rather than the rule and will be assessed on a case by case basis. The expectation is that projects funded by the HTA programme will deliver information that is both relevant and timely.

In addition, in order to inform decisions on whether and when to update the review, researchers will be expected to give some indication of how fast the evidence base is changing in the field concerned, based on the nature and volume of ongoing work known at the time the review is completed. Applicants should note that they will not be expected to carry out any future updating as part of the contract to complete the review.

### Communication

Communication of the results of research to decision makers in the NHS is central to the HTA Programme. Successful applicants will be required to submit a single final report for publication by the HTA programme. They are also required to communicate their work through peer-reviewed journals and may also be asked to support NETSCC, HTA in further efforts to ensure that results are readily available to all relevant parties in the NHS. Where findings demonstrate continuing uncertainty, these

should be highlighted as areas for further research.

**Timescale**

There are no fixed limits on the duration of projects or funding. However, there is a pressing need within the NHS for the information and so the research would normally be expected to be completed as soon as possible – however it is for applicants to justify the duration and costs proposed.