

A systematic review of social identity-based interventions and their active ingredients

Citation

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Review question

How effective are social identity-based interventions at increasing social identity?

Which social identity-based interventions are the most effective at increasing social identity?

Searches

Electronic bibliographic databases PsycINFO, Teesside University Discovery, Google Scholar, PubMed, Web of Science, MEDLINE, APA PsycArticles, Psychology and Behavioural Sciences Collection, CINAHL Ultimate

English language

No date restriction

Types of study to be included

Inclusion:

Single group

Independent groups

Include a specific pre-post measurement of social identity

Intervention studies

Quantitative studies

Mixed-methods studies

Exclusion

Studies that do not involve a social identity-based intervention

Purely qualitative studies

Condition or domain being studied

Any that focus on building social identity



Participants/population

a despaires population
Inclusion
Any age range
Intervention
Include pre- and post-measure of social identification
Exclusion
Not intervention
Conducted in a laboratory/simulation studies
Intervention(s), exposure(s)
Any social identity-based intervention
Comparator(s)/control
Participants not receiving intervention
Context
Main outcome(s) [1 change]
Main outcome(s)
Measures of effect
Pre-post changes in social identity.
A sense of shared social identity is foundational to the Social Cure approach to Health and Wellbeing (Haslam et al., 2019) as it is the psychological mechanism which underpins the perception and experience of social support. Possession of strong social identities is associated with increased wellbeing and a reduction in loneliness and depression due to increased feelings of agency, purpose and relatedness.
A prior systematic review and meta analysis by Steffens and colleagues (2019) found positive impacts of social identity informed interventions on psychological wellbeing. This review will build on that work by exploring factors that influence/contribute to successful pre-post changes in social identity. As a consequence, practitioners will have greater understanding of how to embed effective social identity building principles.
Pre-post changes in social identity are defined as any study that has used an explicitly named measure of 'social identity or 'group identity' at at least 2 time points: pre - post.
Additional outcome(s) [1 change]
Additional outcome(s)
Measures of effect



Pre-post changes in psychological wellbeing.

Pre-post changes in other health-related outcomes (if measured)

Exploration of these additional outcomes is dependent on the retrieved results. Given the authors' prior familiarity with the social identity and social cure literature, the most frequently expected additional outcome is anticipated to be psychological wellbeing. This measure will be assessed by exploration of pre-post changes in psychological wellbeing and defined as any study that has used an explicit measure of psychological wellbeing at at least 2 time points: pre - post.

The retrieved results may also include pre-post measurements related to physical health symptoms, e.g., COPD and or changes in physical health condition, e.g., reductions in weight, blood pressure. Where these data are available, pre-post changes will be explored.

Data extraction (selection and coding)

The relevance of studies will be assessed by the study titles, which will be retrieved using the databases and search strategy above. Abstracts of selected studies will be screened to identify whether the studies meet the inclusion criteria stated in this document. At each step, sources will be screened by multiple review authors to assess their eligibility. Review authors will then retrieve and independently assess the full text of each selected study to ensure their eligibility. Any disagreement over eligibility will be discussed with the first author and/or addition review team members if necessary.

Extracted data will be recorded in a standardised form. This extracted data will include: author, date and title of the study, population and participant demographic information, methodology, intervention and control conditions, pre- and post-intervention measures of social identification, study outcomes. Any discrepancies will be resolved through discussion. If necessary, missing data will be sought from study authors.

Risk of bias (quality) assessment

Cochrane's tool for assessing risk of bias will be used to assess compiled data extracted from the included studies and interventions (Higgins et al., 2007). The key domains involved include: selection bias, performance bias, detection bias, attrition bias, reporting bias, and follow-up data. Any discrepancies will be checked with the lead investigator and corrected where necessary.

Reference

Higgins, J. P., Altman, D. G., Gøtzsche, P. C., Jüni, P., Moher, D., Oxman, A. D., ... & Sterne, J. A. (2011). The Cochrane Collaboration's tool for assessing risk of bias in randomised trials. British Medical Journal, 343, d5928.

Strategy for data synthesis [1 change]

The data from this review will be synthesised narratively. A table will be completed (using headings listed in the data extraction section) to summarise and extract the key data from eligible papers. Formal narrative analysis will be employed to synthesise the findings of relevant studies involving social identity-based interventions. The aim of the review is to summarise the most effective interventions for building social identity. This means, where possible, identifying common features of social identity interventions that are consistently associated with increased social identity. That is, the 'active ingredients' of such interventions.

Provided there is a minimum of 3 studies suitable for inclusion, we will employ a narrative synthesis as outlined by Popay et al. (2006). This narrative synthesis will involve summarising findings from individual studies to identify common themes, 'active ingredients', and the contexts within which interventions are effective, ensuring an understanding of the evidence regardless of the volume or homogeneity of quantitative data.

The inclusion criteria for studies in the narrative synthesis will encompass quantitative and mixed-methods studies that provide relevant narrative information. The synthesis will focus on extracting and summarising information related to



intervention components, contexts, mechanisms of action, and outcomes. A comprehensive narrative synthesis will use a convergent synthesis approach enabling the combination of quantitative and qualitative data (Pluye et al., 2009).

The appraisal of the quality and reliability of included studies will be conducted using the Mixed Methods Appraisal Tool (MMAT) (Hong et al., 2018), which is designed for the appraisal of qualitative, quantitative, and mixed-methods studies. This assessment will inform the interpretation of the results, which will discuss the implications of the findings for theory, practice, and future research, considering the strengths and limitations of the evidence.

Hong, Q. N., Fàbregues, S., Bartlett, G., Boardman, F., Cargo, M., Dagenais, P., ... & Pluye, P. (2018). The Mixed Methods Appraisal Tool (MMAT) version 2018 for information professionals and researchers. Education for Information, 34(4), 285-291. https://doi.org/10.3233/EFI-180221

Pluye, P., Gagnon, M. P., Griffiths, F., & Johnson-Lafleur, J. (2009). A scoring system for appraising mixed methods research, and concomitantly appraising qualitative, quantitative and mixed methods primary studies in Mixed Studies Reviews. International Journal of Nursing Studies, 46(4), 529-546. https://doi.org/10.1016/j.ijnurstu.2009.01.009

Popay, J., Roberts, H., Sowden, A., Petticrew, M., Arai, L., Rodgers, M., ... & Duffy, S. (2006). Guidance on the conduct of narrative synthesis in systematic reviews: A product from the ESRC Methods Programme. Lancaster University.

Analysis of subgroups or subsets

Subgroup analyses may be undertaken if sufficient data are available (E.g., comparing the effectiveness of social identity-based interventions in a health vs. education domain)

Contact details for further information

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Organisational affiliation of the review

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Type and method of review

Intervention, Narrative synthesis, Systematic review

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09 April 2024

Anticipated completion date

09 January 2025



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State the funder, grant or award number and the date of award
Not applicable
Conflicts of interest
Language
English
Country
England
Stage of review
Review Ongoing
Subject index terms status
Subject indexing assigned by CRD
Subject index terms
MeSH headings have not been applied to this record
Date of registration in PROSPERO
10 April 2024
Date of first submission
22 March 2024
Stage of review at time of this submission
The review has not started





Stage	Started	Completed
Preliminary searches	No	No
Piloting of the study selection process	No	No
Formal screening of search results against eligibility criteria	No	No
Data extraction	No	No
Risk of bias (quality) assessment	No	No
Data analysis	No	No

The record owner confirms that the information they have supplied for this submission is accurate and complete and they understand that deliberate provision of inaccurate information or omission of data may be construed as scientific misconduct.

The record owner confirms that they will update the status of the review when it is completed and will add publication details in due course.

Versions

10 April 2024