

Bereavement during the COVID-19 pandemic as a bioethical concern: a systematic integrative review with narrative synthesis

Citation

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Review question

Which policies were used to address the COVID-19 pandemic for people in the last phase of life in different regions in the world?

Were end-of-life care practices during the COVID-19 pandemic aligned with ethical principles and values?

Did bereavement support provided during the COVID-19 pandemic promote ethical principles and values across different regions in the world?

Searches

A systematic literature search will be carried out to identify relevant evidence from the following research databases: PubMed, APA PsycINFO, CINAHL and EBSCO. Database search strategies will be developed using Medical Subject Headings (MeSH). Articles published from October 1, 2019, and February 28, 2023 will be included.

Additional search strategy information can be found in the attached PDF document (link provided below).

Types of study to be included

Inclusion criteria:

- Articles published from October 1, 2019 to February 28, 2023
- Text or publication in English, Portuguese, or Spanish
- Empirical studies (qualitative, quantitative or mixed-methods) that include policy responses used to address the COVID-19 pandemic that were instituted with respect to care for people in the last phase of life; characteristics of end-of-life care practices during the COVID-19 pandemic; and bereavement support provided during the COVID-19 pandemic.

Exclusion criteria:

- Non-English, Non-Portuguese, Non-Spanish, not published in peer-reviewed journal, research on non-human animals.
- Article types: review articles, letters to the editor, animal studies, comments, consensus documents, case studies, practice articles, editorials, Opinion pieces, theoretical frameworks, descriptive or theoretical papers that did not present original research findings.
- Publications that report interventions aimed at healthcare workers dealing with grief rather than the bereaved person or family members.

Condition or domain being studied

Impact of policies in end-of-life care and bereavement during the COVID-19 pandemic.

Participants/population

People in the last phase of life during the COVID-19 pandemic.

Patients receiving palliative and end-of-life care in any context of healthcare provision

Family members and family carers of people in the last phase of life during the COVID-19 pandemic.

Intervention(s), exposure(s)

Policy responses used to address the COVID-19 pandemic

End-of-life care practices during the COVID-19 pandemic

Bereavement support provided during the COVID-19 pandemic.

Comparator(s)/control

Any, or none.

Context

- Across different regions in the world including those at home and in a community setting, long-term care, supported care facility or palliative/hospice care facility.

Main outcome(s)

Ensuring and promoting ethical principles and values for people in the last phase of life during the COVID-19 pandemic.

Additional outcome(s)

None.

Data extraction (selection and coding)

The articles retrieved from the literature searches will be imported into EndNote; duplicates will be removed. Data will be independently extracted by one reviewer (E.M.) under the supervision of the other two reviewers (P.H.M. and S.M.P.). Data will be extracted into a structured data form that will be purposively built for this study. This form will be based on and adapted from PICOD's (Methley et al., 2014; Eriksen et al., 2018): P = Participants (patients at the end-of-life and their relatives), I = phenomena of Interest (end-of-life and bereavement care policies and practices), C = Context (any context of end-of-life care provision during the COVID-19 pandemic), O = Outcomes (any formal measure of evaluation related to ensuring and promoting ethical principles and values for people in the last phase of life and their relatives), D = Design (all research designs, except systematic reviews or case reports). The form will also include the main features of each article, namely the title, author(s), year of publication, country, setting, objectives, main findings/results, including the identification of policies, and recommendations for best practice. The data extraction process will be cross-checked by the third reviewer.

Risk of bias (quality) assessment

The methodological rigor of the included studies will be evaluated following the 9-item tool developed by Hawker et al. (2002). This tool has been widely used when performing systematic integrative reviews in palliative care. It is composed of nine questions, which are easily scored to assess the quality of the study and can even be transformed into a quantitative scale.

To minimize bias, one researcher (E.M.) will screen the first 25% of retrieved articles under the supervision of the two other researchers (P.H.M. and S.M.P.). Articles will initially be screened by titles and abstract, followed by full-text reading of selected articles. Selected articles will be read full by two researchers independently (E.M. and P.H.M.) to identify eligible studies; any doubts will be discussed until reaching consensus among the three researchers (E.M., P.H.M. and S.M.P.).

Strategy for data synthesis

Whittemore and Knafl's integrative review methodology (Whittemore and Knafl, 2005) will be applied using the five stages of the approach regularly used as a basic conceptual structure of the integrative reviews. A narrative synthesis will be undertaken and guided by Popay et al., 2006, which approach is recommended for bringing together broad knowledge from a variety of methodologies.

Data synthesis will be performed by one researcher (E.M.) under the supervision the other two researchers (P.H.M. and S.M.P.). Main themes are defined a priori and aligned with the research questions as follows: (i) Policies in end-of-life care and bereavement during the COVID-19 pandemic; (ii) end-of-life care practices during the COVID-19 pandemic and its inherent ethical principles and values; and (iii) bereavement support during the COVID-19 pandemic and its inherent ethical principles and values.

E.M., as a doctorate student, will work under the supervision of his doctoral supervisors (P.H.M. and S.M.P.) to produce a comprehensive set of synthesized findings.

The systematic literature review and narrative synthesis will be reported in accordance with the Preferred Reporting Items for Systematic Review and Meta-Analyses (PRISMA) 2020 statement (Page et al., 2021).

Analysis of subgroups or subsets

Planned subgroups for this systematic review with narrative synthesis include are patients and family members.

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Type and method of review

Narrative synthesis, Systematic review

Anticipated or actual start date

15 February 2023

Anticipated completion date

30 April 2023

Funding sources/sponsors

None

Conflicts of interest

Language

English

Country

Mozambique, Portugal

Stage of review

Review Ongoing

Subject index terms status

Subject indexing assigned by CRD

Subject index terms

Bereavement; COVID-19; Grief; Humans; Pandemics; Policy

Date of registration in PROSPERO

06 February 2023

Date of first submission

06 February 2023

Stage of review at time of this submission

Stage	Started	Completed
Preliminary searches	Yes	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

06 February 2023