WFOT Congress 2014

Abstract Review Guide

Introduction: Overview

This Guide:

- is intended to provide information, guidance and support to the many occupational therapists from around the world who have volunteered their time and expertise to review the abstracts for the WFOT Congress 2014.

- will review the rationale, process and outcomes of the abstract review process, and provide examples of rated abstracts.

- will provide relevant information to authors submitting abstracts for consideration for the WFOT Congress 2014.
Introduction: Objectives

The objectives of this Guide are:

- To improve consistency of ratings among reviewers.
- To suggest factors for consideration when rating abstracts.
- To suggest an approach to the review process.
- To provide examples of rated abstracts.
- To enhance the experience for the reviewer.
Introduction

“I think the most important consideration when reviewing an abstract is to ask myself if I would want to use a half hour or hour of my finite life to listen to that presentation,” said one reviewer.
Outcomes of review process

- A scientific program that.....
  - Is of high quality and excites Congress attendees.
  - Reflects innovation and diversity of occupational therapy research, practice and professional issues.
  - Reflects a balance between research, practice, professional issues and education.
  - Supports the themes of Congress.
  - Promotes critical reflection, dialogue and debate of key issues in occupational therapy.
Overview of review process

- Submitted abstracts are matched anonymously to two or more volunteer reviewers based on self-declared knowledge of reviewer.
- Abstracts are reviewed and scored using the WFOT Congress 2014 Abstract Scoring Sheet, and Online Abstract Review Sheet.
- Reviews are submitted to Congress Scientific Committee.
- Abstracts assigned a rating of “accepted”, “reserve” and “not accepted” by the committee based on ratings, comments and program balance.
- Accepted presentation is assigned a timeslot in the program.
Reviewer Self Reflection

- Do I have sufficient knowledge in the abstract content and methodology to provide a fair review?
- Do I base my ratings on a consideration of all aspects of the abstract review form or do I focus more on grammar and writing style (note: author may be bilingual) vs. content?
- Even though the abstract is anonymous, is there any conflict of interest for me?
Reviewer considerations for research abstracts

- Is the research quantitative or qualitative? Do I understand the research design options?
- Do I understand the methodology outlined in the abstract? Is it appropriate for the question?
- Do I understand the statistical terms used? Are the statistics appropriate to the research question?
Reviewer considerations for non research abstracts

- Does the abstract provide new information or approach the topic in a novel way?
- Does the abstract address issues that are important to the profession?
- Is the information based on a theoretical approach?
- Will the content change practice?
Approaches to the review

- No right or wrong approach.
- Most reviewers read all abstracts first, before rating to get a “general feel” for the overall range.
- Some reviewers then rank order the abstracts or create a grading rubric.
- Reviewers then rate each abstract individually using the rating form.
Rating the abstract

- “I read them all through first, thinking initially do I get a picture of what they are talking about, does it make sense, some are so clear yet others I have to read several times to get at what they are saying (and that tells me lots).”
Rating the abstract

“The strategies that I use to do reviews is to honour the criteria that is provided, seek clarification if I am uncertain about information within or missing from the criteria and add to the criteria as I go through the abstracts to ensure that I am using the same criteria across the board.”
Rating the abstract

"I jot notes on each abstract and give each a quick mark. I then set aside the abstracts that I reacted to most strongly - both positively and negatively…in a day or two I re-read and re-mark each abstract in a more careful manner….I find that a bit of time for reflection helps me determine what engendered that strong positive or negative reaction on initial reading and whether that response was valid. These abstracts often have a more significant change in mark on second reading."
Approaches to the review

- Some reviewers comment before scoring; others after.
- Reviewers check their consistency in a variety of ways – some rate the abstracts at 2 sittings independently, then compare scores.
- Others rank order after scoring, then compare scores to see if they are consistent with the ranking.
- Some reviewers review highly and poorly rated abstracts again to ensure fairness.
### Score sheet sample

#### WFOT Congress 2014 - Abstract Scoring Sheet SAMPLE

<table>
<thead>
<tr>
<th>Abstract Number:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Criteria</td>
</tr>
<tr>
<td><strong>Quality of Content</strong></td>
</tr>
<tr>
<td>Introduction/rationale</td>
</tr>
<tr>
<td>Objectives</td>
</tr>
<tr>
<td>Methods/approach</td>
</tr>
<tr>
<td>Results/practice implications</td>
</tr>
<tr>
<td>Conclusion</td>
</tr>
<tr>
<td><strong>Educational Value</strong></td>
</tr>
<tr>
<td>Interest &amp; appeal to occupational therapy audience</td>
</tr>
<tr>
<td>Important contribution to research/practice/theory or knowledge</td>
</tr>
<tr>
<td>Novel or innovative contribution, relevant to the Congress theme/s</td>
</tr>
<tr>
<td><strong>Quality of Written Abstract</strong></td>
</tr>
<tr>
<td>Self-contained</td>
</tr>
<tr>
<td>Coherent &amp; readable</td>
</tr>
<tr>
<td><strong>TOTAL SCORE</strong></td>
</tr>
</tbody>
</table>
Rating the abstract: Quality of the content

- *Introduction or rationale* must provide a clear background to the rest of the abstract, and should be reinforced in the conclusion.
- *Objectives* must outline the content or expectations of either the project (generally appropriate for research, practice and education topics) or the presentation (may be more appropriate for workshops or other presentation formats).
Rating the abstract: Quality of the content (cont.)

- *Methods or approach* must provide a clear description of the methodology used, and it must be appropriate to the objectives and rationale of the project or presentation.

- *Results or practice implications* must indicate clearly the findings of the project, and they must be consistent with the methodology and objectives.

- *Conclusions* must be consistent with the introduction or rationale and objectives, so that the information is complete.
Rating the abstract: Educational value

- *Interest and appeal* to occupational therapy audience – what would be of interest to them? Is the content relevant to an occupation-based approach? Does it bring a perspective that is relevant to current practice?

- *Contribution to research/practice/theory or knowledge* - does the abstract indicate the possibility of changing current practice? Does it add significantly to the current body of work in this area?


Rating the abstract: Educational value (cont.)

- **Novel or innovative contribution, relevant to the Congress theme/s** - is the information novel/unique/innovative in some way? Is the approach or methodology new or different from known approaches? Do the results provide support for a new approach or for changing an accepted approach? Are the ideas presented provocative? Does the abstract reflect the theme/s of the conference?
Rating the abstract: Quality of written abstract

- *Is the abstract self-contained?* It is important to consider grammar and writing style in this section only, and not let poor grammar influence all ratings; some readers rate this section first and rate on first impressions. Check here for biases in preferred writing styles; try to be objective. Look for judicious use of acronyms, abbreviations, references.

- *Coherent and readable* - should be clear on first reading; repeated readings for clarity indicate lower readability. Logical sequence, active voice.

- Remember that English may not be the first language of many authors.
Considerations for reviewer comments

WFOT requests that reviewers include some constructive comments on each abstract as some authors may wish to receive feedback about their abstract, to improve their skills in writing and research. However, unless specifically requested by the abstract author via the Congress Manager, and agreed by the abstract reviewer, these comments will not be released. In the event that there is agreement by all parties, both the reviewer and the abstract author will remain anonymous. This process will be managed by the Congress Committee.

Reviewers can submit comments via the Online Abstract Review Sheet.
Considerations for reviewer comments (cont.)

“I always comment. I usually discuss the potential audience…If I think another format would be better or if I have some advice re presentation I include that. I also comment on any lack of clarity (often by asking a question) or wording problems.”
Considerations for reviewer comments (cont.)

- “I try to put something on each abstract as I know how helpful it is to have some feedback. Positive feedback is very motivating! Constructive feedback, stated in a helpful manner is too.”

- “I recognize that some topics appeal only to a small audience, but they are keenly interested… I try to balance breadth of interest vs. depth of interest.”
Consider the tone of the comments – are they constructive and helpful? Do they suggest a better approach?

Low scores should be supported by a comment.

Comments should be specific, so the reader can learn how to improve.

A different presentation format (such as a poster format) may be suggested.
Introduction: Partners of individuals with dementia often experience challenges with their ability to manage the daily issues that arise with being the primary caregiver. Personal stress, increased physical demands, personality changes in their partner and dealing with their own aging are common issues that partners may face. Occupational therapists are often consulted to work with the individual with dementia, however it is often the partner that is the primary recipient of services. Little is known about how male partners are able to cope with the daily challenges of being the primary caregiver.

Objectives: The purpose of this phenomenological study was to explore the lived experience of the male partners of individuals with dementia to develop an understanding of the strategies they use to support their partner at home.
Example: Well-written abstract (cont)

**Methods:** Using purposive sampling, male partners of individuals with dementia were recruited for this study. Participants were individually interviewed using a semi-structured questionnaire. Interviews were audio-taped, transcribed verbatim and reviewed to develop a coding scheme and definitions. Two researchers conducted line-by-line review of the transcripts to identify themes and sub-themes that emerged from the data. Additional notes were made throughout the analysis to document further ideas and assumptions. The summary of themes was sent to participants for member checking.
Example: Well-written abstract (cont)

**Results:** Data saturation was achieved after analysis of the data from twelve participants. Three sets of primary coping strategies emerged from the data and were confirmed by participants. Longing for the Past, Day-to-day Survival, and A Predictable and Unwanted Future were themes that encapsulated the finding of this study.

**Conclusion:** The results of this study will assist occupational therapists to understand the coping strategies that the male caregivers of individuals with dementia use to maintain their partners at home. Identifying ways to support these primary caregivers is an important role for occupational therapists as our population ages.
Quality of content
(23/25 points)

Introduction (5/5)
- The author provides justification for the study.

Objectives (5/5)
- Objective of project is specific.

Methods (4/5)
- Methods used to conduct the study are clear.
- Partners are not necessarily the same as caregivers, although they appear to be synonymous in this study. This could be clarified.

Results (5/5)
- Results are identified.

Conclusion (4/5)
- Some repetition in the conclusion that doesn’t add to the abstract.
Educational value (13/15 points)

Interest and appeal to an occupational therapy audience (i.e. needs to be heard, describes historical perspective, current trends or new ideas) 4/5

- May have a limited audience as it addresses a very specific population and area of practice.

Important contribution to practice, research, theory or knowledge 5/5

- An interesting topic and I am eager to hear more about the results and implications for occupational therapists working in this area, in particular I look forward to a discussion and more details on the strategies.
Educational value (13/15 points) (con’t)

Novel or innovative contribution, relevant to the conference theme 4/5

- Although not a novel issue, the author suggests that limited work has been done to explore this issue and thus anticipate that the contribution is novel.

- Author does not clearly link the topic to conference theme.
Quality of written abstract (9/10 points)

Self-contained (i.e., should not include abbreviations, acronyms, quotes or extensive reference citations) and concise/specific (i.e., each sentence is maximally informative, especially the lead sentence) 5/5

Coherent and readable (i.e., written in logical sequence, use of clear vigorous prose, use of the active not passive voice, avoids use of personal pronouns) 4/5

- Abstract is clearly worded.
- Uses passive voice at times.
Introduction: With the increasing number of older adults “aging in place”, older adults are at risk for falls in their home. Person and environment factors can contribute to a situation that may result in injury. The result of falling can be detrimental to one’s health and quality of life as it may result in prolonged hospitalization.

Objectives: To develop an in-home falls program to reduce the incidence of falls in the well elderly.

Methods: Participants met with an occupational therapist to learn about home safety techniques on a weekly basis over a three month period. They used the Falls-Reduction Inventory to educate seniors on possible home hazards.
**Results:** Twelve seniors participated in the project. Participants completed an initial evaluation of hazards in their home and then worked with the OT to develop solutions to reduce the risk of falls. A total of 88 home hazards were identified by the participants. Interviews with the older adult participants suggested that they felt more capable of identifying risks in their home environment.

**Conclusion:** The results of this project support the involvement of occupational therapists in working with seniors on falls prevention in their home.
Introduction (3/5)

The abstract highlights the issue of falls in older adults. However, clarification of the problem leading to the need to do this project would be helpful. Further background information on previous work and the gaps in that work would also assist to justify the need for this project.

Objectives (4/5)

The objective stated is clear, however, is this the true objective of the study? By reading the methods, it appears that the project was not about program development.
Methods (2/5)

The methods used to address the issue are not clearly linked to the objectives of the project. For example, how were interviews used and analyzed? More specific information on the methods used would be helpful for understanding how data was collected.

Could you describe the “Falls-Reduction Inventory”? Further information on this inventory would assist the reader to understand how it was used in this project.

Results (2/5)

The statement “Participants completed an initial evaluation of hazards in their home and then worked with the OT to develop solutions to reduce the risk of falls” is better suited to the methods section as it addresses “what was done” in the study.
Results con’t

Results of the data collected are described, however, it is difficult to interpret the results as they do not clearly link to the methods section. Clearly linking methods and results would help the reader make this connection.

Conclusion (2/5)

The final statement of conclusion is not entirely consistent with objectives of the study, this makes it difficult to determine whether the project was successful.

It is not clear how the results will contribute to the knowledge base of occupational therapists’ understanding of this area of practice; a strong statement about this contribution would strengthen the abstract.
Educational value (8/15 points)

Interest and appeal to an occupational therapy audience (i.e. needs to be heard, describes historical perspective) (5/5)
- This is a topic of interest to occupational therapy clinicians and the topic area would have broad appeal to the conference delegates as it addresses a common area of OT practice.

Important contribution to practice, research, theory or knowledge (1/5)
- Unfortunately, limited information and lack of clarity on the methods used make it difficult to determine how this project can contribute to furthering OTs understanding of the problem.

Novel or innovative contribution, relevant to the conference theme (2/5)
- The author could clearly articulate the novel contribution of this project to the topic area; further development of a justification for the project in the introduction section would address this.
Quality of written abstract (4/10 points)

Self-contained (i.e., should not include abbreviations, acronyms, quotes or extensive reference citations) and concise/specific (i.e., each sentence is maximally informative, especially the lead sentence) (2/5)

- The first sentence could provide more information as to how it links to the project; reversing the clauses would strengthen that sentence.
- The term “aging in place” should be elaborated on, or not used rather than put in direct quotes.
- Some sentences require further development (e.g. They used the Falls-Reduction Inventory to educate seniors on possible home hazards).
- OT is used as an acronym without defining it first.
- Each sentence should stand on its own as a complete sentence (e.g. see objectives).
Quality of written abstract (4/10 points) (cont’d)

Coherent and readable (i.e., written in logical sequence, use of clear vigorous prose, use of the active not passive voice, avoids use of personal pronouns) (2/5)

- The use of various terms to describe the participants (seniors, older adults, elderly) is somewhat confusing; I would suggest that the author use consistency in terms and ensure that person-first language is used.
- It would be beneficial to review the abstract for grammatical accuracy and clarity of writing.
- Use of personal pronouns is discouraged.
Reviewing dilemmas: No results

- Abstracts on works-in-progress are accepted
- Writers should provide information on preliminary results or preliminary trends if available
- If no results are available, authors should discuss practice implications

“the results of this survey will inform occupational therapists on the most relevant assessments used by therapists working with…”
Reviewing dilemmas:
Well written but poor content

- Try to address the potential significance of this work
  - Has little work been done or reported on in this area?
  - Is this an emerging area of practice?
- Check yourself for reviewer bias – is this a content/practice area that you are familiar with?
- Ensure that the educational value section marks reflect your comments and perspective
Reviewing dilemmas: Poorly written but interesting content

- Suggest that reviewers evaluate the quality of writing first, then re-read the abstract to rate the quality of content
Reviewing dilemmas: Unfamiliar methodology or terminology

- Highlight unfamiliar terms or methods in the first review and look them up (see resources and links page).
- Focus more on substantial methodological issues rather than details as these are difficult to assess in a 300 word abstract.
- Balance judging scientific merit with the author’s ability to convey their results and interpretation.
- If you feel unqualified to review a particular abstract, please advise the WFOT Congress 2014 Secretariat at wfot2014@c-linkage.co.jp and ask that the abstract be re-assigned to another reviewer.
Helpful links and resources

- [www.otevidence.info](http://www.otevidence.info) provides useful information on assessing the methodological evidence in published papers. This will also be applicable in this context.

- [McMaster University, School of Rehabilitation Science – Evidence-based Rehabilitation](http://www.mcmaster.ca/rehabilitation) provides guidelines to appraising quantitative and qualitative literature.
Feedback

- Have you found this presentation helpful?
- Is there too much information/not enough?
- Do you have suggestions to improve this presentation?
  If so, please email:
  WFOT Congress 2014 Secretariat at wfot2014@clinkage.co.jp

Thanks for your input!