METODOLOGICKÁ PRAKTIKA V PSYCHOLOGII

1. 11. 2024

Bc. Lucie Zernerová, MSc., Ph.D.

Program dnešního setkání

9:10 – 11:10   BLOK 1 - Intro
- Cíle předmětu a podmínky atestace
- Metodika Rapid Evidence Assessment
- Příklad výzkumné zprávy

11:30 – 12:50   BLOK 2 – Systematická práce se zdroji
Mgr. Michaela Málková
Správkyně EIZ pro FF UK, Knihovna Filozofické fakulty UK, SVI

13:00 – 14:05   BLOK 3 – Práce v týmech
Brainstorm témat a výzkumných otázek

Cíle

Prohloubení a aplikace znalostí a dovedností z metodologie psychologického výzkumu:

- Stanovení výzkumného záměru
- Rešerše a kritické zhodnocení odborné literatury
- Formulace výzkumných otázek
- Systematické vyhledávání a práce s literaturou
- Hodnocení, extrakce a syntéza dat
- Prezentace projektu a průběžných výsledků
- Zpracování výzkumné zprávy

Návaznost předmětu

Výchozí předměty:

- Úvod do studia psychologie – specifika akademického psaní, citační norma APA, práce s elektronickými informačními zdroji, etika, plagiarismus

- Psychologická metodologie – výzkumné metody a designy, výzkumné otázky a hypotézy, rešerše literatury

- Základy statistiky – statistická analýza kvantitativních dat

- Základy psychometrie a psychodiagnostiky – psychometrické vlastnosti dotazníků

Sylabus Metodologických Praktik

Datum		Téma
1. 11.	P018	Organizační aspekty
		Metodika Rapid Evidence Assessment
		Přihlášení témat a termínu prezentací do 11.11.
29. 11.	P018	Prezentace I. (9:10 – 12:20)
		Konzultace (12:30 – 14:00)
20. 12.	P018	Prezentace II. (9:10 – 12:20)
		Konzultace (12:30 – 14:00)
10. 1.	P018	Závěrečná konference (9:10 – 14:00)
		Odevzdání výzkumné zprávy do 24. 1. 2025

Přihlášení skupin, tématu a termínu 1. prezentace

Dne **11. 11. 2024 v 11:00** bude na Moodle zpřístupněn formulář pro přihlašování skupin, tématu a termínu prezentace - je tedy nutné přihlásit:

- Výzkumné týmy po 4 členech (max)

- Zvolené téma

- Termín první prezentace – výzkumná otázka a její kontext („business case") a průběžný progres projektu: 29.11. nebo 20.12.

Podmínky získání atestace

Aktivní účast při práci ve skupinách:

1. Prezentace úvodní rešerše k výzkumnému tématu a průběžného postupu projektu (rozsah max 5 ppt slidů; 15min prezentace + 5min diskuze) – v termínu 29.11. nebo 20.12.

2. Závěrečná prezentace výsledků výzkumu - 10.1.

3. Odevzdání vypracované výzkumné zprávy ve formátu APA:

    - Zpráva v rozsahu 15-20 normostran + přílohy

    - Formát Word

Požadavky 1. prezentace

V termínu 29.11. nebo 20.12. budou jednotlivé skupiny prezentovat progres vašeho rapid evidence assessment na vámi zvolené téma

Prezentace bude zahrnovat:

- Zvolené téma / název projektu

- Představení výzkumného týmu

- Výzkumná otázka a její kontext („business case")

- Klíčová slova a mapa konceptů (PICOC/S viz Step 2)

- Inclusion / exclusion criteria (Step 3)

- Dokumentaci vaší vyhledávácí strategie (Step 4-5)

- + případné otázky, které byste rádi diskutovali

Požadavky 2. prezentace

V termínu 10. 1. budou všechny skupiny prezentovat výsledky vašeho rapid evidence assessment na vámi zvolené téma

Prezentace bude zahrnovat:

- Zvolené téma / název projektu

- Stručně: Výzkumná otázka a její kontext („business case"), Klíčová slova a mapa konceptů (PICOC/S viz Step 2), Inclusion / exclusion criteria (Step 3), Dokumentaci vaší vyhledávácí strategie (Step 4-5) – zejména pokud zde dojde k nějakým změnám na základě feedbacku na 1. prezentaci

- Hlavním předmětem prezentace budou **výsledky a závěry** ve formě „evidence statements" (Step 8 – 12)

Struktura výzkumné zprávy

- **Název**

- **Abstrakt** (max 250 slov) + klíčová slova

- **Introduction /Úvod** – formulace tématu a otázky, zdůvodnění, proč je dané téma důležité

- **Method / Metoda** – vylučovací a zahrnovací kritéria, vyhledávací strategie, flow diagram (PRISMA), hodnocení kvality studií

- **Results / Výsledky** – výsledky extrakce a syntézy dat

- **Discussion / Diskuze** – interpretace a kontextuální začlenění výsledků, limity, teoretické a praktické implikace zjištění

- **Reference** – APA formát, referenční software (např. Zotero)

- **Přílohy** – 1. Vyhledávací strategie pro všechny databáze, 2. výsledky kritického hodnocení a extrakce studií, 3. Tabulka shrnující extrakci dat zahrnutých studií

Typy rešerší / literature reviews

Systematic literature review

- Aims to cover all existing research relative to a carefully (and often narrowly) defined topic -> carefully defined search parameters

- Presented as a study rather than a context piece

- May analyse gathered material

- Applies measure of 'quality' of research to filter and evaluate what studies are included and excluded

Traditional / Narrative review

- based on a critical assessment of a <u>personal selection</u> of material and has different purposes

Typy rešerší / Narrative literature reviews

Conceptual

- Synthesises and critically assesses literature with respect to a particular issue to produce greater understanding of the issue

A state-of the-art review

- Examines the most recent contributions to a field or area of study
- Focuses on trends, agreements, and debates

Expert review

- Undertaken by a senior figure in the field and heavily inflected with their own particular interests and contributions

Typy rešerší / Narrative literature reviews

Scoping review
- Aims to to create an agenda for future research project(s)
- Documents what is already known & focuses on the gaps, niches, disputes, blank and blind spots
- Aims to generate the research question(s) & justify an approach

Traditional – introduction to empirical study / thesis / book
- Aims to position a piece of research that has been undertaken
- Provides a critical assessment of the research and theory in the field
- Focuses primarily on material that is significant relative to the conducted / presented research
- The literature is used to locate the contribution, the "what-we-now-know-that-we-didn't-before-and-why-this-is-important"

Co je Rapid Evidence Assessment?

Co je Rapid Evidence Assessment / Rapid Review?

Systematic literature review (SLR)

- a review that "attempts to collate all empirical evidence that fits pre-specified eligibility criteria in order to answer a specific research question. It uses explicit, systematic methods that are selected with a view to minimizing bias, thus providing more reliable findings from which conclusions can be drawn and decisions made" (Cochrane handbook for systematic reviews of effectiveness)

vs

Rapid review (RR)

- a streamlined approach to synthesizing evidence in a timely manner - typically for the purpose of informing emergent decisions faced by decision makers in health care settings.(Khangura et al.; Systematic reviews, 2012; http://www.systematicreviewsjournal.com/content/1/1/10)

Srovnání SLR vs RR

	Systematický přehled literatury	Rapid review
Účel	Komplexní a vyčerpávající syntéza všech dostupných zdrojů ohledně konkrétní výzkumné otázky	Rychlá syntéza dostupných důkazů pro informovanější rozhodování v krátkém časovém horizontu
Časová náročnost	měsíce až roky, v závislosti na rozsahu a složitosti tématu.	týdny až měsíce, v závislosti na požadované rychlosti a dostupných zdrojích.
Metodologie	Striktně definovaná a reprodukovatelná metodologie zahrnující rozsáhlé vyhledávání, kritické hodnocení kvality studií a podrobnou syntézu výsledků.	Zjednodušená metodologie s možnými úpravami, jako je omezení počtu prohledávaných databází, zkrácení procesu hodnocení kvality nebo omezení rozsahu zahrnutých studií.

Srovnání SLR vs RR

	Systematický přehled literatury	Rapid review
Rozsah vyhledávání	Široké a důkladné vyhledávání zahrnující více databází, šedou literaturu a nepublikované studie, aby se minimalizoval bias a zahrnuly všechny relevantní důkazy.	Omezené vyhledávání zaměřené na klíčové databáze a publikace, často vynechávající šedou literaturu a nepublikované studie kvůli časovým omezením.
Hodnocení kvality	Důkladné kritické hodnocení kvality a rizika biasu u všech zahrnutých studií pomocí standardizovaných nástrojů.	Může zahrnovat zjednodušené nebo vynechané hodnocení kvality studií, což může zvýšit riziko biasu ve výsledcích.
Syntéza výsledků	Detailní a komplexní syntéza výsledků, často zahrnující metaanalýzu pro kvantitativní kombinaci dat z různých studií.	Stručná syntéza výsledků s důrazem na klíčové nálezy, často bez kvantitativní kombinace dat.
Transparentnost	Vysoká úroveň transparentnosti s podrobným popisem všech kroků procesu, včetně protokolu před zahájením přehledu.	Může mít nižší úroveň transparentnosti kvůli zkráceným nebo vynechaným krokům v procesu, často bez předem definovaného protokolu.

Srovnání SLR vs RR

	Systematický přehled literatury	Rapid review
Využití	Vhodné pro situace, kdy je potřeba důkladné a komplexní zhodnocení důkazů, například pro tvorbu klinických směrnic nebo informování o dlouhodobých strategiích.	Vhodné pro situace, kdy je potřeba rychlé rozhodování na základě dostupných důkazů, například během zdravotních krizí nebo při urgentních politických rozhodnutích.
Riziko biasu	Nižší riziko biasu díky důkladnému vyhledávání, hodnocení kvality a zahrnutí všech relevantních studií.	Vyšší riziko biasu kvůli zjednodušeným metodám, omezenému vyhledávání a možnému vynechání důležitých studií.
Náklady a zdroje	Vyžaduje značné zdroje, včetně času, financí a odborných znalostí, často zahrnující multidisciplinární tým.	Vyžaduje méně zdrojů, může být proveden menším týmem nebo jednotlivcem, ale s potenciálním kompromisem v kvalitě a důkladnosti.

Zdroje

IMPLEMENTATION SCIENCE

METHODOLOGY **Open Access**

Expediting systematic reviews: methods and implications of rapid reviews

Rebecca Ganann*, Donna Ciliska and Helen Thomas

Abstract

Background: Policy makers and others often require synthesis of knowledge in an area within six months or less. Traditional systematic reviews typically take at least 12 months to conduct. Rapid reviews streamline traditional ... riation in ... well as

RESEARCH METHODS AND REPORTING

Check for updates

Updated recommendations for the Cochrane rapid review methods guidance for rapid reviews of effectiveness

Chantelle Garritty,[1,2] Candyce Hamel,[1,3] Marialena Trivella,[4,5,6] Gerald Gartlehner,[4,7] Barbara Nussbaumer-Streit,[4] Declan Devane,[8] Chris Kamel,[9] Ursula Griebler,[4] Valerie J King,[10] on behalf of the Cochrane Rapid Reviews Methods Group

For numbered affiliations see end of the article

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This article provides updated guidance on methods for conducting rapid reviews of effectiveness, targeted at Cochrane and other stakeholders interested in the methodology of rapid reviews. The guidance, developed by the Cochrane Rapid Reviews Methods Group, builds upon previous interim guidance, and incorporates changes ... public partners, healthcare providers, policy makers), are outlined. The paper presents a definition of a Cochrane rapid review and additional considerations for rapid reviews of effectiveness to enhance the efficiency of the review process. In conclusion, the Cochrane Rapid Review Methods Group's updated guidance, ...

CEBMa Guideline for Rapid Reviews

- 12-step process

- Practical recommendations

- Examples

- Available from www.cebma.org/guidelines/

# CEBMa Guideline for Rapid Reviews

Steps in the RR process

Step 1.   Background: What is the context of the RR question

Step 2.   Formulating the RR question: What does the RR answer?

Step 3.   Defining inclusion criteria: Which studies will be taken into account?

Step 4.   Search strategy: How should the studies be sought?

Step 5.   Study selection: How should you select the studies?

Step 6.   Data extraction: What information should you extract?

Step 7.   Critical appraisal: How to judge the quality of the studies.

Step 8.   Results: What did you find?

Step 9.   Synthesis: What does it all mean?

Step 10. Conclusion

Step 11. Limitations

Step 12. Implications of the findings for practice

Step 1
Background: What is the context of the RR question

- Statement of the rationale for the RR

- „business case" = explanation of why is this question important

- Example report: Barends, E., Rousseau, D., Cioca, I. and Wrietak, E. (2023) High-performing teams: An evidence review. Scientific Summary. London: Chartered Institute of Personnel and Development.

- available at cipd.org/en/knowledge/evidence-reviews/high-performing-teams
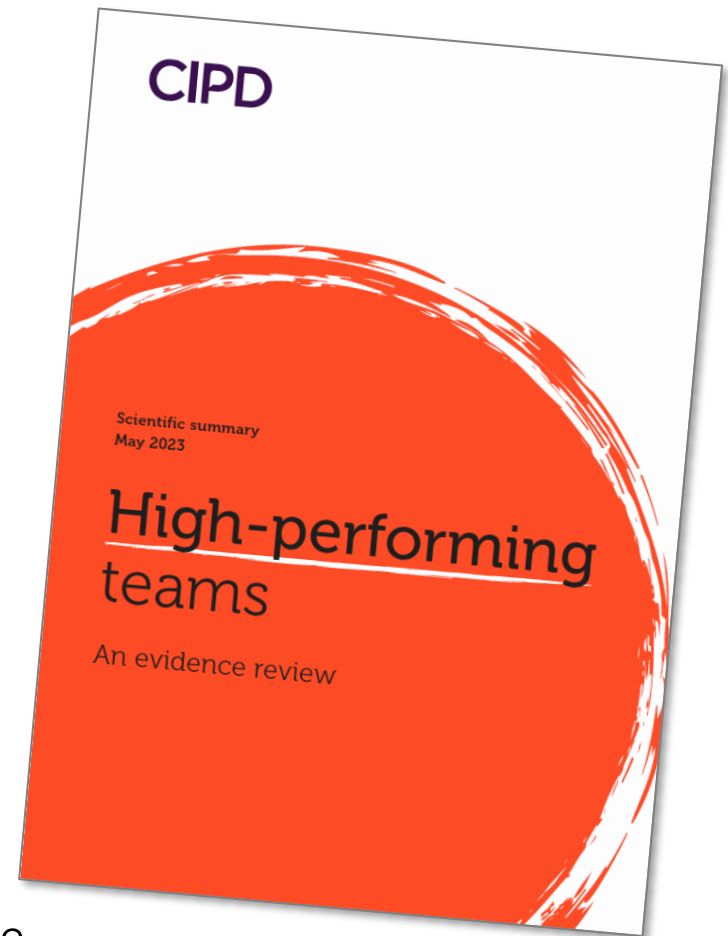
Step 2
Formulating the question: What does the RR answer?

Impact questions:

- The effect of an intervention, factor or independent variable

- The drivers (antecedents) of a certain outcome

EXAMPLE 1

Main question

What is known in the scientific literature about the impact of goal setting on the task performance of sales agents?

Supplementary questions

- *What counts as goal setting?*

- *What is the assumed causal mechanism / how is it supposed to work?*

- *What is known about the overall effect of goal setting on task performance?*

- *What is known about possible moderators and/or mediators that affect the relationship between goal setting and task performance?*

Step 2
Formulating the question: What does the RR answer?

Non-impact questions:

- **Needs:** What do people want or need?
- **Attitude:** What do people think or feel?
- **Experience:** What are peoples' experiences?
- **Prevalence:** How many / often do people / organizations ...?
- **Procedure:** How can we implement ...?
- **Process:** How does it work?
- **Exploration:** Why does it work?

EXAMPLE

Main question

What is known in the scientific literature about the prevalence of burnout among nurses in the US?

Supplementary questions

- *What is burnout?*
- *What are the symptoms of burnout more widely and for nurses more specifically?*
- *Are there reliable and valid instruments available to measure burnout?*

Step 2
Formulating the question: What does the RR answer?

PICOC specification, alternatively PICOS (S = type of studies):

Population	Who?	Type of employee, subgroup, people who may be affected by the outcome
Intervention	What or How?	Management technique/method, factor, independent variable
Comparison	Compared to what?	Alternative intervention, factor, variable
Outcome	What are you trying to accomplish / improve / change?	Purpose, objective, dependent variable
Context	In what kind of organization / circumstances?	Type of organization, sector, relevant contextual factors

Step 2
Formulating the question: What does the RR answer?

Develop your concept map – e.g.:

Can cognitive behavioural therapy improve self esteem in patients with eating disorders?

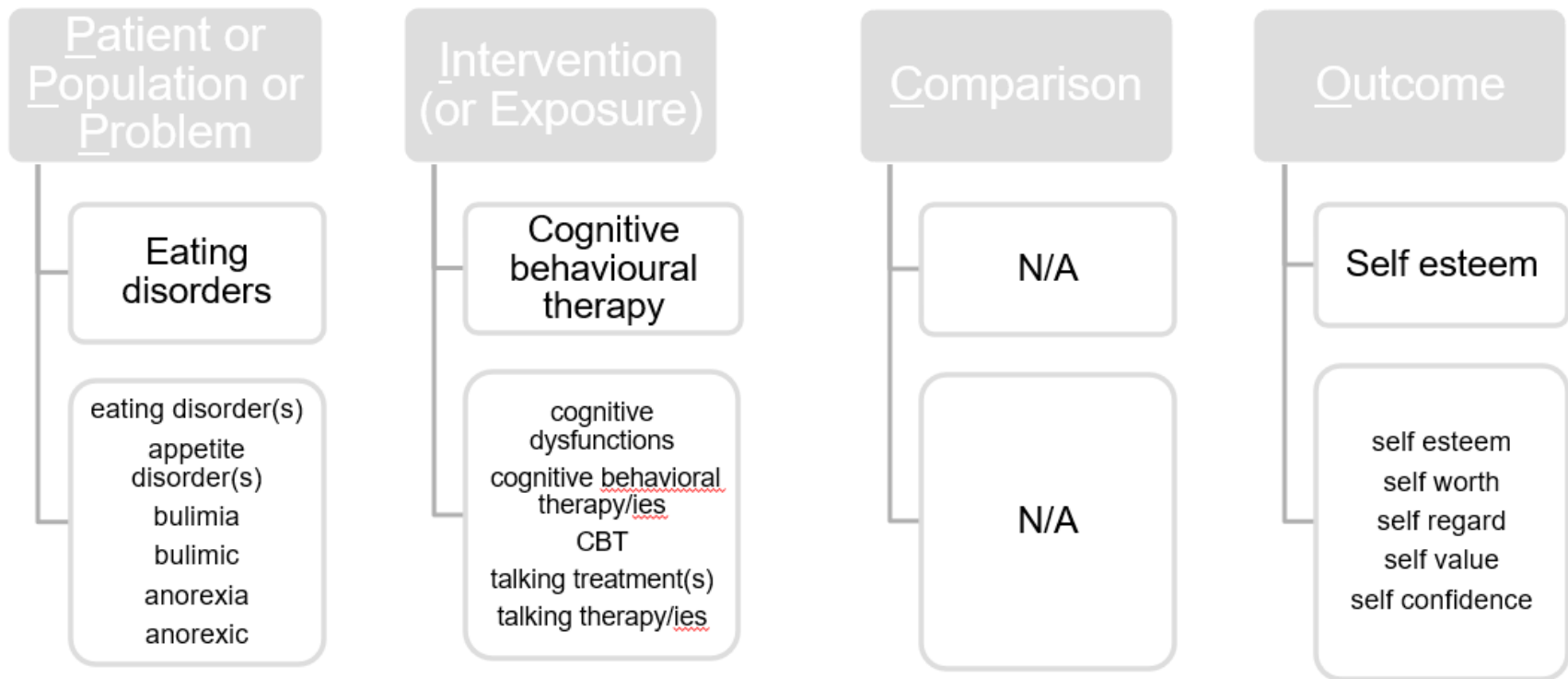| Patient or Population or Problem	Intervention (or Exposure)	Comparison	Outcome
Concept	Concept	Concept	Concept
Synonyms	Synonyms	Synonyms	Synonyms

Step 2
Formulating the question: What does the RR answer?

Develop your concept map – e.g.:

Can cognitive behavioural therapy improve self esteem in patients with eating disorders?

Patient or Population or Problem	Intervention (or Exposure)	Comparison	Outcome
Eating disorders	Cognitive behavioural therapy	N/A	Self esteem
eating disorder(s) appetite disorder(s) bulimia bulimic anorexia anorexic	cognitive dysfunctions cognitive behavioral therapy/ies CBT talking treatment(s) talking therapy/ies	N/A	self esteem self worth self regard self value self confidence
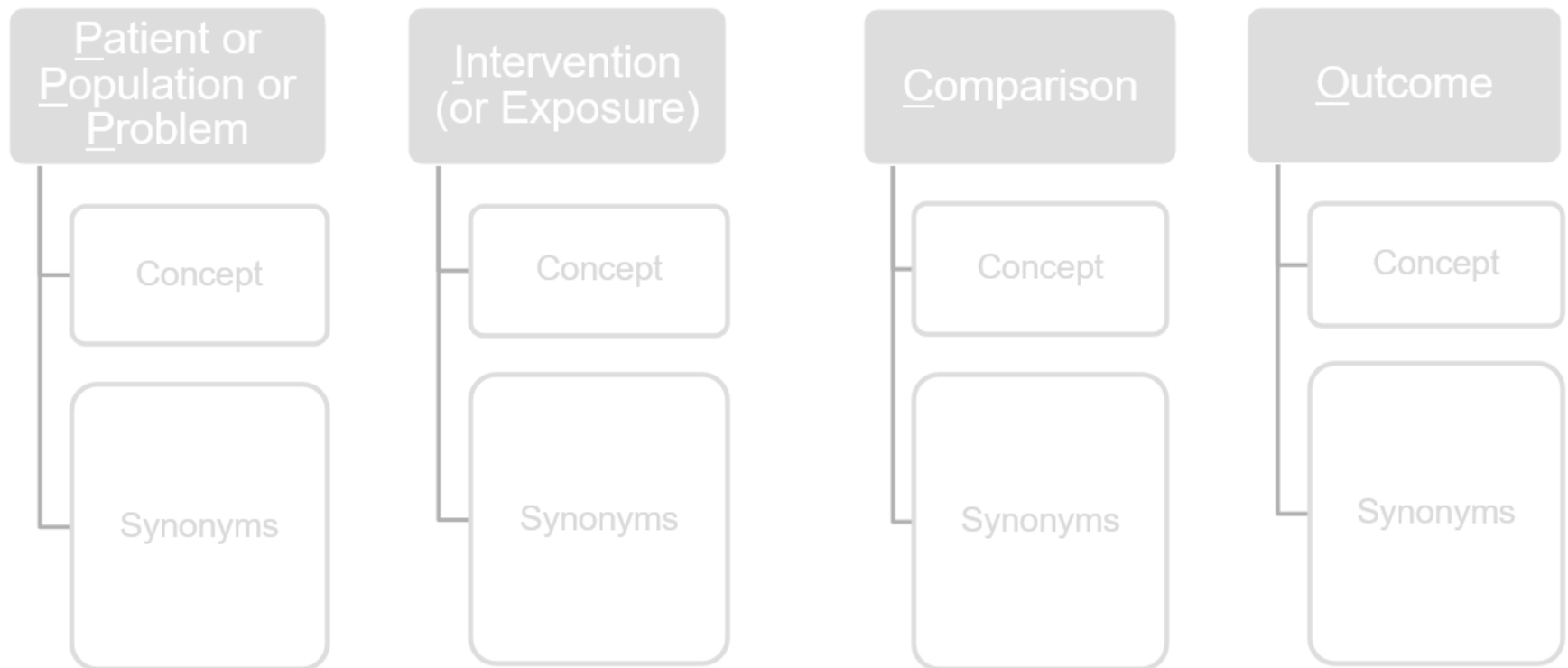
Step 3
Defining inclusion/exclusion criteria

Pre-specification of criteria for including and excluding studies

EXAMPLE

Inclusion criteria

1. **Date:** published in the period 1980 to 2020 for meta-analyses and the period 2000 to 2020 for primary studies

2. **Language:** articles in English

3. **Type of studies:** quantitative, empirical studies.

4. **Study design:** controlled studies

5. **Measurement:** studies in which the effect of goal setting on task performance was quantitatively measured

6. **Outcome:** task performance

7. **Context:** studies related to workplace settings.

Step 3
Defining inclusion/exclusion criteria

Pre-specification of criteria for including and excluding studies

Exclusion criteria

1. Studies including goal setting as part of health-, lifestyle- or treatment-related interventions;

2. Studies focusing uniquely on students and the education context.

Step 3
Defining inclusion/exclusion criteria

The effectiveness of psychological interventions for reducing PTSD and psychological distress in first responders: A systematic review and meta-analysis

	Inclusion criteria	Exclusion criteria
Population	First responders who work at the sites of critical incidents including police officers, firefighters, search and rescue personnel, and emergency and paramedic teams. First responders with and without any pre-existing mental health diagnoses.	Other types of first responders, such as in-hospital health care workers (e.g., emergency room doctors and nurses) or military first responders (e.g., peacekeepers and soldiers)
Interventions	Individual or group psychological intervention that were delivered by registered clinicians (e.g., psychologists or psychiatrists) and non-clinicians (e.g., experiences police officers or supervisors).	Studies that used different types of interventions, such as physical or pharmacological interventions rather than psychological interventions were excluded
Control group	Any type of control group (e.g., no intervention, alternative intervention, or wait list) was included.	No control group
Outcome	PTSD symptoms as rated by an observer (e.g., doctor or researcher) using validated scales such as PTSD checklist or self-reported PTSD symptoms measured using validated scales such as, PTSD symptoms scale self-report PSS-SR. Secondary outcomes were stress, anxiety, depression, and burnout also measured via observer ratings or self-report, using validated scales (e.g., the Hospital Anxiety and Depression scales HADS, for anxiety and depression and the Maslach Burnout Inventory MBI, for burnout.	Other measures
Studies	Studies that used randomized controlled trial (RCTs) designs or controlled before-after designs (CBAs), as defined in the Cochrane handbook, were included.	Non-RCTs, open trials with a pre-post analysis. Published in other languages, reviews, posters, presentations, case reports, dissertations, letters.

Step 3
Defining inclusion/exclusion criteria

Inclusion/exclusion criteria (your review)

	Inclusion criteria	Exclusion criteria
Population		
Interventions		
Control group		
Outcome		
Context / Studies		

Step 4
Search strategy

Searching at least two different databases

EXAMPLE

The following four databases were used to identify studies: ABI/INFORM Global, Business Source Premier, PsycINFO and Web of Science. The following generic search filters were applied to all databases during the search:

1. Scholarly journals, peer-reviewed

2. Published in the period 1980 to 2016 for meta-analyses and the period 2000 to 2016 for primary studies

3. Articles in English

A search was conducted using combinations of different search terms, such as 'goal setting', 'goal attainment', 'goal pursuit' and 'performance'. In addition, the references listed in the studies retrieved were screened in order to identify additional articles for possible inclusion in the REA. We conducted 8 different search queries and screened the titles and abstracts of more than 350 studies. An overview of all search terms and queries is provided in Annex I.

Step 4
Search strategy

Searching at least two different databases

- Medline ↗ (biomedicine)
- Web of Science ↗ (all subject areas, including sciences and social sciences)
- Scopus ↗ (all subject areas, particularly sciences and social sciences)
- EMBASE ↗ (pharmacology, public health)
- CINAHL Plus ↗ (Nursing and Allied health)
- PsycINFO ↗ (psychology)
- HMIC ↗ (health services management, grey literature)
- Cochrane ↗ (Systematic reviews)
- Applied Social Sciences Index and Abstracts ↗ (ASSIA)
- Sociological Abstracts ↗
- Social Services Abstracts ↗

Step 4
Search strategy – search terms

Your basic search

P = eating disorder(s) OR appetite disorder(s) OR bulimia OR bulimic OR anorexia OR anorexic

  AND

I = cognitive behavioural therapy/ies OR talkative therapy OR acceptance and commitment therapy OR mindfulness-based intervention

  AND

C = \

  AND

O = self esteem OR self worth OR self regard OR self value OR self confidence

Step 4
Search strategy - Documentation of the search

| ABI/Inform Global, Business Source Premier, PsycINFO, peer reviewed, scholarly journals, July 2014			
Search terms	ABI	BSP	PSY
S1: ti("virtual team*") OR ti("virtual work*") OR ab("virtual team*") OR ab("virtual work*")	57	38	59
S2: ti("telework**") OR ab("telework*") OR ti(telecommut*) OR ab(telecommut*)	98	87	120
S3: ti("mobile team*") OR ti("mobile work*") OR ab("mobile team*") OR ab("mobile work*")	52	48	62
S4: ti("remote team*") OR ti("remote work*") OR ab("remote team*") OR ab("remote work*")	12	52	14
S5: ti("distributed team*") OR ti("distributed work*") OR ab("distributed team*") OR ab("distributed work*")	42	34	73
S6: S1 – S5	153	167	210
S7: S6 AND ab(experiment* OR laboratory OR "field study" controlled OR "control group" OR "comparison group" OR "control variable" OR quasi OR longitudinal OR randomized	68	34	42
Duplicates removed		48	

Step 4
Search strategy - Documentation of the search

Search activity

My research question:				
Places to search for information:				
List of sources searched:	Date of search	Search strategy used, including any limits	Total number of results found	Comments

Step 5
Study selection / screening by reviewers

- Review of abstracts
- Review of full studies
- Documenting / flow chart
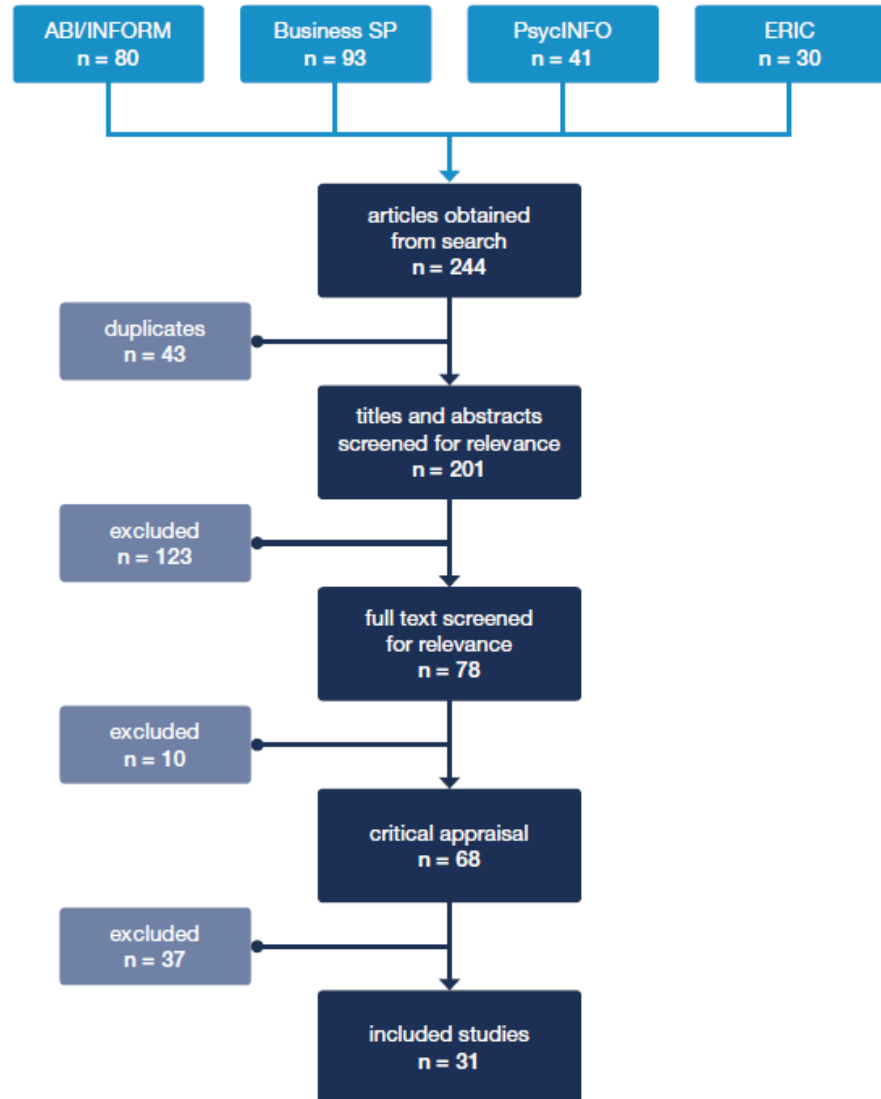
Step 6
Data extraction

- Clearly structured table formatting
- Recording key information relevant to research question

Author & year	Sector / Population	Design + sample size	Main findings	Effect size	Limitations	Level
Abraham & Graham-Rowe (2009)	Systematic review; 2/3 RCT; 1/3 quasi-experimental	Worksite; 8 studies; N = 624 employees	Worksite physical activity interventions which include specific goal setting, goal reviews (i.e. follow-up) and graded tasks have a small, positive impact on fitness-related outcomes	small, positive, d = .33 if specific goal-setting; d = 37 if inclusion of goal review; d = .44 if inclusion of graded tasks	Limited relevance to the review question	AA
Bandura & Locke (2003)	General population	Traditional literature review	Discusses the importance of self-efficacy for understanding, predicting and changing people's performance or goal attainment. Self-efficacy is stated to be related (based on meta-analytical findings from previous studies), among others, to more proactive (self-set) goal-setting, challenging goals, and faster goal attainment, as well as effort and performance.	No effect sizes provided	No systematic search, no information regarding design of included studies	D
Brown, 2005	Canadian government employees in a training program	Randomized controlled trail, N=74, field setting	Both participants who were urged to do their best and those who set proximal (shorter-term) as well as distal (= longer-term) goals had increased transfer of training (= maintenance of learned material over time and generalization of learned material from the classroom to the workplace context) relative to those who set only distal outcome goals. There was no significant difference in the transfer level of participants urged to do their best and those who set proximal plus distal goals. In addition, there was no difference between the experimental conditions	Eta2 = 0.11	Short time frame between training and measurement (six weeks)	A

Step 7
Critical appraisal

- Evaluating the quality of evidence

Design	Level
Systematic review or meta-analysis of randomized controlled studies	AA
Systematic review or meta-analysis of non-randomized controlled and/or before-after studies	A
Randomized controlled study	
Systematic review or meta-analysis of controlled studies without a pretest or uncontrolled study with a pretest	B
Non-randomized controlled before-after study	
Interrupted time series	
Systematic review or meta-analysis of cross-sectional studies	C
Controlled study without a pretest or uncontrolled study with a pretest	
Cross-sectional study (survey)	D
Case studies, case reports, traditional literature reviews, theoretical papers	E

Step 7
Critical appraisal

- Evaluating the effect sizes (Cohen, 1988)

Effect size	Small	Medium	Large
Standardized mean difference: d, Δ, g	≤ .20	.50	≥ .80
Correlation: r, ρ	≤ .10	.30	≥ .50
Correlation: r^2	≤ .01	.09	≥ .25
ANOVA: η^2, ω^2	≤ .01	.06	≥ .14
Chi-square: ω^2	≤ .10	.30	≥ .50
Simple regression: β	≤ .10	.30	≥ .50
Multiple regression: β	≤ .20	.50	≥ .80
Multiple regression: R^2	≤ .02	.13	≥ .26

Step 8
Results

- Step 8.1 **Definition**: What is meant by X?
- Step 8.2 **Causal mechanisms**: How is X assumed to have an effect on Y?
- Step 8.3 **Main findings**
- Step 8.4 **Moderator and mediator effects**

Moderator: a variable that affects the direction and/or strength of the relation between an independent or predictor variable (e.g. goal setting) and an outcome variable (e.g. work performance). Put differently, moderators indicate when or under what conditions a particular effect can be expected.

Mediator: a variable that specifies how or why a particular effect or relationship occurs.

Step 9
Synthesis: What does it all mean?

Describe the volume and characteristics of the overal evidence base:

- Research designs, variables studied, outcomes measured, details of context

- Note on the consistency and convergence of evidence: consistent, contested or mixed evidence?

Describe what the evidence indicates

… Although goal-setting can be regarded as one of the most effective organizational interventions, this REA also demonstrates that goal-setting should not be used as a one-size-fits-all, over-the-counter treatment to boost performance, as there are several moderators that affect the outcome. For example, when employees must first acquire knowledge or skills to perform a task, or when the task involved is complex, then specific and challenging goals can have a negative effect on performance. In those situations, behavioral goals and learning goals are more effective, as outcome goals only result in increased performance once people have mastered the task. Furthermore, this REA indicates that the effect of goal-setting varies across workers' ability levels, implying that 'ability-based' goals will be more effective than a 'one-goal-for-all' approach, where everyone is assigned the same performance target…

Structuring your arguments – varying level of detail

Long shots – medium shots – close-ups

- Background material can be considered in a broad overview

- Studies with most direct relevance need to be carefully and critically examined in more detail

- Clear, explicit links to current study – never assume that the reader will see the point you are making

Guccione & Wellington (2017). *Taking Control of Writing Your Thesis: a Guide to Get You to the End.* Bloomsbury Academic: London.

Changing gears metaphor / „řazení rychlostí"

A lower gear („jedete na jedničku")

- Paraphrasing, restating

- Summarizing

- Describing studies

Going up a gear („vyšší rychlost")

- Interpreting studies in context of other work

- Connecting with other studies / literature

- Contrasting with other studies / literature

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Changing gears metaphor / „řazení rychlostí"

Top gear („nejvyšší rychlost")

- Synthesizing / pulling together and categorizing / grouping

- Identifying trends

- **Critically evaluating strengths and limitations of each study / category of studies**

    - Identifying what is new, different, or controversial?

    - Is anything lacking, inconclusive, or contradictory?

    - Focus on theory and methodology

- Developing own argument, taking a position

- Building case for own study – how does it build on and adds to existing work

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Writing style

Bem (2003):

- Primary criteria for good scientific writing are accuracy and clarity

- Style and flair comes after that
- Clear, short sentences

- Aim to communicate complicated ideas in a simple, engaging fashion

- Find a model and mimic their style

- Consistent use of terminology
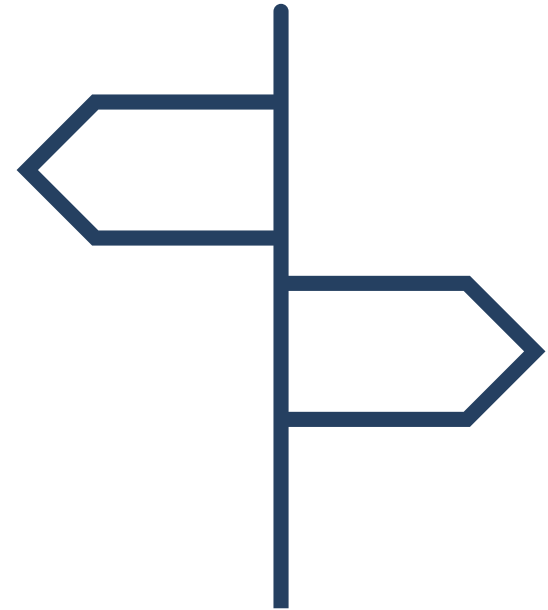
- Signposting

- Meaningful headings

Step 10
Conclusion

Concise statement of the main findings

Goal-setting is one of the most powerful and evidence-based interventions for enhancing performance, provided that moderating factors such as goal attribute, type of task, organizational context and employee characteristics are carefully taken into account.

Step 11
Limitations

EXAMPLE

To provide a 'rapid' review, concessions were made in the breadth and depth of the search process. As a consequence, some relevant studies may have been missed.

A second limitation concerns the critical appraisal of the studies included: this REA did not incorporate a comprehensive review of the psychometric properties of the tests, scales and questionnaires used.

A third limitation concerns the fact that the evidence on several moderators is often based on a limited number (sometimes only one) of studies. Although most of these studies were well controlled or even randomized, no single study can be considered to be strong evidence – it is merely indicative.

Finally, this REA focused only on high-quality studies, i.e. studies with a control group and/or a before- and after-measurement. For this reason, usually a large number cross-sectional studies are excluded. As a consequence, new, promising findings that are relevant for practice may have been missed.

Given these limitations, care must be taken not to present the findings presented in this REA as conclusive.

Step 12
Implications of the findings for practice

This REA demonstrates that Emotional Intelligence (EI) is not a radical new construct that will redefine leadership. Even though EI has (some) positive effects, these effects can also be explained by the overlap with other psychological constructs. In addition, the claims made by well-known consultancy firms such as Hay Group that "EI can make the difference between a highly effective and an average professional contributor" is not supported by the outcome of this REA. For this reason, we advise against investing in training courses that claim to develop our executives' EI.

Example report

- Statement of the rationale for the RR

- „business case" = explanation of why is this question important

- Example report: Barends, E., Rousseau, D., Cioca, I. and Wrietak, E. (2023) High-performing teams: An evidence review. Scientific Summary. London: Chartered Institute of Personnel and Development.

- available at cipd.org/en/knowledge/evidence-reviews/high-performing-teams

CIPD

Scientific summary
May 2023

High-performing
teams

An evidence review

Literatura / Zdroje – Rapid Reviews

Barends, E., Rousseau, D.M. & Briner, R.B. (Eds). (2020). *CEBMa Guideline for Rapid Reviews in Management and Organizations, Version 2.0.* Center for Evidence Based Management, Amsterdam. Available from www.cebma.org/guidelines/

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Garritty, C., Hamel, C., Trivella, M., Gartlehner, G., Nussbaumer-Streit, B., Devane, D., Kamel, C., Griebler, U., & King, V. J. (2024). Updated recommendations for the Cochrane rapid review methods guidance for rapid reviews of effectiveness. *BMJ*, e076335. https://doi.org/10.1136/bmj-2023-076335

CEBMa
center for
Evidence-Based Management

CEBMa Guideline for

Rapid Reviews

in Management and Organizations

Version: 2.0
Editors: Eric Barends, Denise M. Rousseau, Rob B. Briner
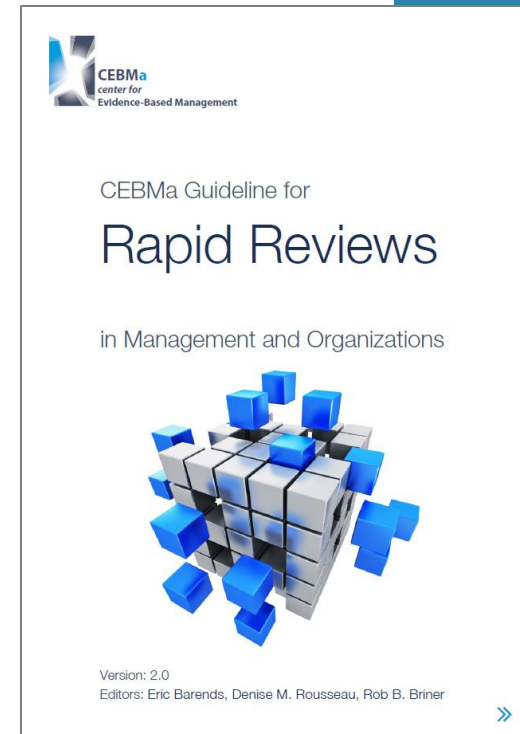
Literatura / Zdroje – Sys Lit Reviews (SLR)

Rethlefsen et al. (2021). PRISMA-S: An extension to the PRISMA Statement for Reporting Literature Searches in Systematic Reviews. *Systematic Reviews*, *10*(1), 39. https://doi.org/10.1186/s13643-020-01542-z

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Literatura / Zdroje

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Mareš, (2013). Přehledové studie: jejich typologie, funkce a způsob vytváření. https://doi.org/10.5817/PedOr2013-4-427

Děkuji za pozornost

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Konzultační hodiny: po domluvě, středy 12:30 – 14:00

Celetná 153c / online