



ATRA Rapid Review & Systematic Review Guidelines

General Instructions

1. Register your research protocol on [PROSPERO](#) and document all post-hoc changes. Registering your research protocol helps to reduce publication bias.
2. It is highly recommended to include the words 'Recreational Therapy' in the title, as well as the study design, to increase the profession's recognition and provide a focus for the discussion section of the manuscript. Here are several examples to illustrate this: 1) A rapid review of loneliness and leisure participation for individuals with Schizophrenia: Opportunities for recreational therapy., 2) A systematic review of stress management interventions in recreational therapy practice for adults with alcohol addiction. 3) The efficacy of a recreational therapy art intervention for veterans with Post Traumatic Stress Disorder: A randomized controlled trial. 4) A rapid review of virtual reality interventions for persons with Parkinson's disease: Implications for recreational therapy practitioners,
3. Publication: It is highly recommended to submit the manuscript to peer-reviewed journals indexed within PubMed to increase research exposure. Some journals to consider are listed below.

Activities, Adaptation, and Aging
American Journal of Public Health
Archives of Physical Medicine and Rehabilitation
Clinical Rehabilitation
Complementary Therapies in Clinical Practice
Disability and Health Journal
Disability and Rehabilitation
Disability and Rehabilitation: Assistive Technology
Frontiers in Psychiatry
International Journal of Yoga
Journal of Interprofessional Care
PLOS ONE (charges an open access fee)
Psychology, Health, & Medicine
Quality of Life Research

Rapid Review vs. Systematic Review

Rapid Review (A)

A rapid review follows most of the principle steps of a systematic review; however, some components are simplified or omitted. It typically takes about four months or less to complete. It is used to obtain quick and timely information for decision-making and understanding new and emerging topics. Limitations include the search not being comprehensive, possible non-blinded appraisal and selection, and potential biases when skipping or limiting certain steps.

Systematic Review (B)

A systematic review is a comprehensive review of the evidence to find all relevant studies. It typically takes about 12 months to complete (more or less depending upon the amount of literature needed to review). It is used to synthesize and appraise all available research, which is required to inform treatment guidelines. A limitation is that research questions may be narrowly defined.

Rapid Review (A) and Systematic Review (B) Guidelines

Step #1: Determine your research question.

A&B: Determine your PIO (population, intervention, outcome) research question by completing the below table. The population and intervention must be part of the ATRA Research Agenda.

Population (P)			Intervention (I)	Outcome (O)
Diagnoses	Age	Setting		
	Consider all ages of research on the topic is limited.	Consider all settings if research on the topic is limited.		If completing a rapid or systematic review, consider including all outcomes identified in the literature, as appropriate.

Step #2: Determine the inclusion and exclusion criteria.

A&B = List the inclusion and exclusion screening criteria.

Inclusion Criteria	
Language	English only (unless you have resources to translate other languages)
Years searched	It is recommended that investigators search a minimum of the past 10 years.
Diagnosis	Explain the stage, degree, severity, or type of the chosen diagnosis (e.g., complete spinal cord injury, Parkinson's disease at Hoehn & Yar Scale 1 to 3, moderate to severe dementia)
Age	Explain the specific age group (e.g., 3-5 years old, 65+). Consider all ages if research on the topic is limited.
Setting	Explain the specific setting (e.g., inpatient rehabilitation, community-dwelling, residential). Consider all settings if research on the topic is limited.
Intervention	Clearly define the intervention. For example, if the intervention is a physical activity through gaming, what type of gaming will be included (active video gaming such as Nintendo Wii or Xbox Kinect; virtual reality gaming such as HTC Vive or Oculus Rift)?

Design	Quantitative, qualitative, and mixed methods studies. It is recommended that you include all three types.
Types of studies	Reviews (e.g., scoping reviews, systematic reviews, umbrella reviews, rapid reviews, guidelines), randomized controlled trials, non-randomized control and experimental group, pre-post experimental group only Note: The inclusion of case study research is not recommended unless it is the majority of research available on the intervention.
Other	List additional inclusion criteria here

Exclusion Criteria	
Other Diagnoses	List other co-occurring diagnoses of the population that will be excluded. For example, if the diagnosis is Autism, you might decide to exclude studies where the population had a secondary mental health condition.
Intervention	List specifics of the intervention that will be excluded. For example, if the intervention is board games, you might choose to exclude electronic board games.
Other	List additional exclusion criteria here.

Step #3: Search.

A&B = Develop a search string to determine its effectiveness. The search string should have yielded several articles that you identified as being relevant to the research question. Revise as needed. Enlist the help of a research librarian, if available.

A&B = Search Cochrane CENTRAL, MEDLINE (e.g., via PubMed), Embase, CINAHL, SportDiscus, PsycInfo, & [RT Wise Owls](#). Search the American Journal of Recreation Therapy, Therapeutic Recreation Journal, and ATRA Annual.

A&B = Search additional specialized databases depending upon the search topic (A = no more than 1-2 additional databases, can be omitted if time and resources are limited).

B = Search for clinical practice guidelines. Search grey literature, such as theses, dissertations, and study registries.

Note: Record search strings, sources searched, and the dates each search was conducted.

Step #4: Screen abstracts.

A = Screen each abstract to determine which studies meet the inclusion criteria. Each abstract only needs to be screened one time by one reviewer.

B = Screen each abstract to determine which studies meet the inclusion criteria. Each abstract needs to be reviewed by two separate and blinded reviewers. Use a third reviewer to serve as a tie-breaker for disagreement.

Note: Consider using abstract screening software such as [Abstrackr](#)

Step #5: Screen full-text and reference lists.

A = Screen full-texts of studies identified as having met the inclusion criteria to ascertain that they accurately meet the inclusion criteria. Each full-text only needs to be screened one time by one reviewer.

B = Screen full-texts of studies identified as having met the inclusion criteria to ascertain that they accurately meet the inclusion criteria. Review reference lists of included studies, reviews (e.g., scoping reviews, systematic reviews), and clinical practice guidelines to detect missed studies during the literature search or were erroneously excluded during literature screening. Each full-text and reference list needs to be reviewed by two separate and blinded reviewers. Use a third reviewer to serve as a tie-breaker for disagreement.

Step #6: Extract data.

A = Use a single reviewer to extract data. It is recommended you use a second reviewer to check for correctness and completeness of extracted data. Limit data extraction to a minimal set of data items.

B = Use two blinded reviewers to extract data. Use a third reviewer to serve as a tiebreaker for disagreement.

Step #7: Complete a risk of bias assessment.

A = Use a valid risk of bias tool. Use a single reviewer to rate the risk of bias. Use a second reviewer to verify the decisions made. Limit the risk of bias to the most critical outcomes.

B = Use a valid risk of bias tool. Use two blinded reviewers to rate the risk of bias. Utilize a third reviewer to serve as a tiebreaker for disagreements.

Note: It is recommended that researchers use the [risk of bias assessment tools](#) developed by the National Institutes of Health.

Step #8: Synthesize findings.

A = Synthesize the evidence. Findings can be written in a narrative/descriptive format. Use a single reviewer to grade the evidence. Use a second reviewer to verify the decisions made.

B = Synthesize the evidence. Use two blinded reviewers to grade the evidence. Use a third reviewer to serve as a tiebreaker for disagreements.

Note: It is recommended that researchers use the [Johns Hopkins Evidence Level and Quality Guide](#) to grade the evidence.

Additional Resources

[Cochrane Handbook for Systematic Reviews of Interventions](#)

[Cochrane Rapid Reviews: Interim Guidance from the Cochrane Rapid Reviews Methods Group](#)

