Review Protocol

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As part of the studies in his doctoral program investigating the role of humor in therapy

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This protocol is revised by Dr. José Manuel García Montes on 16.12.2020 Last modification on 23-09-2021 This protocol is based on the recommendations made by the authors Liberati et. al. (2009) in their article "The PRISMA Statement for Reporting Systematic Reviews and Meta-Analyses of Studies That Evaluate Health Care Interventions: Explanation and Elaboration".

1. OBJECTIVES

To examine whether humor plays a role in increasing the psychological flexibility of clients and therefore their problem-solving skills in psychotherapy we will review randomized, controlled trials that assessed the effect of humor in psychotherapeutic interventions. Because we don't know how much information we can find about the role of humor in therapy, we want to keep the search as broad as possible. Of course, our aim is to find as many studies as possible that contain randomized controlled trials. But to prevent to skip information that could be relevant to our research we also want to include more type of studies as stated under point 2.5.

2. ELIGIBILITY CRITERIA

Inclusion criteria:

- 1. No restrictions are imposed on the date of publication.
- 2. Published, as well as unpublished, investigations will be included.
- 3. Articles in the English, Spanish and Dutch language will be included.
- 4. Participants:
 - a. Participants are at least 18 years and at most 65 years of age.
 - b. Participants can function normal cognitively. They are not cognitively impaired due to, for example, autism, dementia or an accident which led to brain damage.

5. Type of studies:

- a. Randomized controlled trials.
- a. Observational studies with the principal focus on humor as a therapeutic intervention.
- b. Case studies with the principal focus on humor as a therapeutic intervention.
- c. Cross sectional studies which contain humor at least a variable of the personality of the therapist or client.
- d. Correlational studies that relate humor with one or more variables relevant to therapeutical interventions.

6. Type of interventions:

- a. The focus of the investigations is on applying humor in therapy, on the influence of humor on the psychopathology of the clients and/ or their personality.
- b. Primary we are looking at the clinical therapy setting of clients receiving some sort of psychotherapy.

- c. Secondly, we are including investigations in which clients receive therapeutical sessions in a medical treatment, in which the biomedical treatment is supported by psychological support.
- d. Lastly, we are including investigations in which sessions are investigated in which psychologists perform coaching.
- e. The length of the interventions investigated should be at least a minimum of three sessions (brief therapy). There's no maximum to the amount of sessions.

7. Type of outcome measures:

- a. Although in the doctoral study we're interested in the role of humor in increasing the psychological flexibility of clients and therefore their problem-solving skills, in the systematic review we are interested in any result of applying humor in psychotherapy.
- b. Outcome measures are derived from standardized and validated scales.
- c. Quantitative and or qualitive outcome measures are available.

3. INFORMATION SOURCES

- 1. We will be using the services of the library of the university of Almería Nicolás Salmerón of the University of Almería. At the time of writing this protocol it wasn't clear yet whether we would collaborate with the Vrije Universiteit in Amsterdam in writing this systematic review. If so, we will expand the search for relevant studies with the extra resources available if those resources actively add new databases. We will mention any addition in the protocol and explain why we think it was useful.
- 2. Via the services of the library of the university of Almería Nicolás Salmerón we selected SCOPUS and Proquest as the main databases to start our search. Those databases contain among others the following databases:
- Psychinfo (via Proquest)
- Medline/ Pubmed (via SCOPUS)
- Psycarticles (via Proquest)
- PsycBOOKS (via Proquest)
- PsycTESTS (via Proquest)
- Psychology database (via Proquest)

Furthermore, we will include the database Psicodoc because it contains studies in the Spanish language, and the database Narcis or an equivalent that contains more articles in the Dutch language.

- 3. We will be using the following search terms:
 - a. English
 - i. Humour*
 - ii. "Funny interventions"
 - iii. Therapy or Therapeutic or Psychotherapy
 - iv. Personality or "Personality trait*"
 - v. Depression or "Depressive disorder*" or "depressive episode*" or "depressive symptom*"
 - vi. Anxiety or "Anxiety disorder" or "Symptom* of anxiety"
 - vii. "Evaluation of humour"
 - viii. Treatment or "Psychological treatment" or "Therapeutic treatment"
 - ix. "Psychological flexibility"
 - x. "Psychological rigidity"
 - xi. "Problem solving skill*" or "Problem Solving"
 - xii. Creativity
 - xiii. Confusion
 - xiv. Resilience

b. Spanish

- i. Humor*
- ii. "Intervenciones graciosas"
- iii. Terapia or Terapéutic* or Psicoterapia
- iv. Personalidad or "Rasgo* de la personalidad"
- v. Depresión or "trastorno* depresivo*" or "trastorno de depresión" or "episodio* depresivo*" or "síntoma* depresivo*"
- vi. Ansiedad or "trastorno de ansiedad"
- vii. "Evaluación de humor"
- viii. Tratamiento or "Tratamiento* psicológico*" or "Tratamiento* terapéutico*"
- ix. "Flexibilidad psicológica" or "Flexibilidad psicologica"
- x. "Rigidez psicológica" or "Rigidez psicologica"
- xi. "Habilidad de resolver problemas" or "Resolver problemas"
- xii. Creatividad
- xiii. Confusión
- xiv. Resiliencia

c. Dutch

- i. Humor*
- ii. "Grappige interventies"
- iii. Therapie or Therapeutisch* or Psychotherapie
- iv. Persoonlijkheid or Persoonlijkheidstrek*

- v. Depressie or "Depressieve stoornis*" or "Depressieve episode*" or "Depressieve symptomen"
- vi. Angst or Angststoornis or "Symptomen van angst" or "Symptomen van een angststoornis"
- vii. "Evaluatie van humor"
- viii. Behandeling or "Psychologische behandeling*" or "Therapeutische behandeling"
- ix. "Psychologische flexibiliteit"
- x. "Psychologische rigiditeit"
- xi. "Probleemoplossend vermogen" or "problemen oplossen"
- xii. Creativiteit
- xiii. Verwarring
- xiv. Veerkracht

In SCOPUS we first search for Humour* OR Humor* and get search results. Then we'll search for "Funny intervention*", for "Therapy", etcetera and get individual search results for those keywords as well. We will do that for every keyword, also for the new keywords we might add during the search. Then we will combine the individual search results

#1 OR #2 AND #3 AND in which #1 is the individual search result for Humour*. That way we can combine all the search results for the different keywords. Humour or a synonym in the three different languages will be used in all the combined queries.

We will apply a similar search strategy when using Proquest or other data bases.

- 4. During the search other useful search terms could arise. We will add them to the existing list noting: "added during search process" and explain why we think that's useful.
- 5. We will inspect the reference sections of all selected studies.
- 6. We will contact the first authors of all selected studies to ask them for unpublished material, ongoing research and whether they knew of any other researchers having unpublished data or ongoing studies.

Alterations to the original protocol:

Added keywords during the search:

English

- 1. Coping OR "Coping strateg*"
- 2. Creative
- 3. "Self efficacy" OR Self-efficacy
- 4. Banter OR Wit
- 5. Humor AND NOT Humoral

We filtered the search for the English language.

We also filtered the search for Humour* OR Humor* AND NOT Humoral for publications found in the subject area of medicine. Because the words 'humour' and 'humor' also refers to bodily fluids which is used frequently in medicine. Therefore resulting in thousands of articles not relevant to our search. For the other keywords we did include articles in the subject area of medicine.

Spanish

- 1. Humor* AND NOT Humoral
- 2. "Habilidad de Solucionar Problemas" OR "Solucionar Problemas"
- 3. Creativ* AND NOT Creative
- 4. Coping OR "Estrategia* de afrontamiento"
- 5. Resiliencia
- 6. Autoefficacia
- 7. Gracia OR Broma OR Chanza
- 8. "Therapeutic uses of humor"

We filtered the search results for the Spanish language.

Dutch

- 1. Humor* OR "Grappige interventies" OR "humor* interventies" AND NOT Humoral
- 2. "Problemen oplossen" OR "Het oplossen van problemen"
- 3. Creatie*
- 4. Coping OR Copingvaardigheden OR "Coping strategieën"
- 5. Veerkracht
- 6. Zelfeffectiviteit
- 7. Geestigheid OR Plagerij OR Scherts

We filtered the search for the Dutch language.

During the search process we used the filter Subject Area. We consequently used the next filters to include articles, and excluded all the others:

- Psychology

- Medicine
- Neuroscience
- Social Sciences
- Nursing
- Health Professions

On Friday the 18th of December 2020 we Found 2398 articles in English, Spanish and Dutch that met our criteria in SCOPUS.

On Tuesday the 21st of January 2021 we found 1625 articles in English, Spanish and Dutch that met our modified criteria in SCOPUS. We modified:

- Adding Humor* in the English search
- Restricting the combined searches by excluding this time articles for medicine journals as we found out that 'humor' in medical terms means bodily fluids. Therefore the majority of the search results in medicine journals had nothing to do with the humor we are looking for.
- Adding Wit OR Banter and combining them with all the same search results we combined Humor*, Humour* and Funny as well
- The Spanish and Dutch equivalents of Banter and Wit only resulted in 5 extra articles to be reviewed.

Mainly because of discarding the articles form medicine journals led to a lower search result even though we broadened the search with the terms Wit and Banter.

In Proquest on the 4th of February 2021 we found 1648 articles that met our search criteria without being filtered for duplicates. Exporting them to Mendeley Desktop the amount was diminished to 1295 articles, because of the duplicates removed by Mendeley Desktop. Exporting to Mendely Reference Manager only 938 articles remained, again because of automatic filtering for duplicates by Mendeley Reference Manager.

In Psicodoc on the 11th of February 2021 we found 442 articles in Spanish that met our criteria without being filtered for duplicates with articles found in SCOPUS or Proquest. Because we had to export the articles one by one, we already filtered the articles for relevance before exporting them to Mendeley Reference Manager. Of the 442 articles that we initially found, 76 remained being more or less relevant for the systematic review. Articles were rejected because of different reasons: other language than Spanish, most commonly Portugues, Catalan or France; they had nothing to do with humour, but for example with humoral body fluids or with humor in the sence of 'mood'; because they were duplicates, for example the same articles appeared when we searched with 'depresión' and with 'ansiedad'.

In Narcis on the 12th of February 2021 we found 3 articles in Dutch that met our criteria.

On the 12th of February 2021 we checked for duplicates manually in Mendeley Desktop with the inbuild function to check for duplicates. Merging the dataset found in SCOPUS and Proquest with the dataset of Psicodoc and Narcis, only 2514 remained. Again, duplicates were automatically removed. 355 sets of duplicates remained to be checked manually to see whether they were duplicates or not. After checking these sets 1980 articles remained after importing them into Mendeley Reference Manager for further filtering.

Added articles after the initial search in the selected databases:

Some articles have been added after the initial search, because of suggestions received by colleagues in the field

o 26 in total (16-02-2021)

After the first filtering (finished on 09-04-2021), having removed another 6 articles that turned out to be duplicates exactly 2000 articles remained in the database. Of which:

- 398 were addressing humor/ humour in therapy
- 99 were addressing coping or resilience and humor in the field of Clinical Psychology
- 110 were addressing coping or resilience and humor in the field of Health Psychology
- 112 were addressing personality and humor
- 1281 were discarded because they were not relevant (not addressing humor or in other fields then the clinical psychology)

A second round of filtering and categorizing took place. We filtered articles to be relevant in the field of the Clinical Psychology for adults (18 -65 years). The following categories in order of importance are used for our systematic review:

- 1. Meta-analysis and systematic revisions.
- 2. Randomized clinical trials.
- 3. Comparisons between groups even though they don't meet the requirements for being randomized clinical trials.
- 4. Within group designs with pre-test post-test designs.
- 5. Case studies
- 6. Theoretical, conceptual and/ or speculative articles. (Won't be included in the revision)

On the 27th of May 42 articles remained for full article assessment for eligibility.

Another 31 articles that didn't meet the criteria fully but seemed to deliver important extra information on the subject of humor in therapy were screened again. Some of

which in a full article assessment. Those 31 articles focused mainly on investigating coping and resilience and the effect of humor was measured. Because coping and resilience are important determinants in therapy these articles were revised again to be mentioned in a separate section in the systematic review. Because of limitation of space we finally did not include this in the systematic review. But we have made this information available in table 1. After the screening, 12 articles were rejected because they didn't met the criteria of inclusion. The remaining 19 articles could be distinguished in:

Table 1. Studies on coping and resilience

Type of	Independent	Dependent	Humor main	No of	Remarks
article	variables	variables	focus?	article	
				S	
Review	Neurobiological	Stress-	No (1x)	1	
	and	induced			
	psychosocial	depression	"Humor is		
	factors	and	one of the		
		resilience to	most mature		
		stress	defense		
			mechanisms		
			(Vaillant,		
			1977) and is		
			a coping-		
			mechanism		
			that may		
			lessen the		
			likelihood of		
			developing		
			stress-		
			induced		
			depression.		
Between	-Bulimia	Differences	- No (8x)	9	-"a sense of
group	Nervosa (1x)	in	- No (6x) - Yes (1x)	′	humor" is
design,	-Panic disorder	-depression	- Significant		seen more
correlation	(1x)	-stress	differences		often than
al	-Alcoholic	managemen	between		"humor" or
	patients (1x)	t	use of		"the
	-Depression	-symptoms/	coping		application of
	(1X)	severity of	mechanisms		humor"
	-Adult childr	PTSD	between		-Difference
			participants		between

women (1x) (qualitative research) -PTSD (2x) -use of humor	-substance	strategies (including humor) or less mature (7) - In some articles the participants used more humor than the control group (Klosterman n K, et al (2011). Lashley M. (2006) (2)	7	beneficial coping strategyDepressed patients seem to be less susceptible to humor and rate funny material less than healthy participants. This is not always demonstrate d. But the use of humor as a coping strategy does seem to be negatively affected by depression. (Falkenberg I, Jarmuzek J, Bartels M, Wild, B., 2011) (*1) We don't
coping (1x) -Psychosis (1)	abuse (1x)	- No (5)		understand why they

correlation		-treatment	-no	claim that the
al	- use of humor	satisfaction	significant	model
	coping within	-hostility,	difference	'explains'
	Schizophrenia	aggression	found (I)	humor
	patients (1x)	and anger	-humor as	coping. It
	-use of defense		coping	shows a
	mechanisms like	-psychiatric	strategy was	correlation,
	humor by North	symptoms	linked to	not more
	Korean	(depression/	higher	than that.
	refugees (1x)	anxiety/som	treatment	
		atization/PT	satisfaction	
	-Spanish	SD)	-no clear	
	alcoholics,	-coping	relation was	
	controlled for	strategies,	found	
	personality	among	between	
	disorder (PD),	which humor	humor	
	cognitive		coping and	
	impairment (CI)		aggression	
	and		-less use of	
	benzodiazepine		humor	
	misuse (BM) (1x)		predicted	
	-music based		higher levels	
	affect regulation	-relation	of anxiety	
	in patients	music affect	-alcoholics	
	suffering mental	regulation	with PD	
	health problems	and/or	tend to use	
	from depression	explanation	more humor	
	to schizophrenia	of coping	and other	
	(1)	strategies	maladaptive	
		like humor	coping	
	-borderline		strategies	
	personality	-defense	than	
	disorder (1x)	functioning	alcoholics	
		among	without PD	
		which humor	-the overall	
			model and	
			the variable	
			'discharge'=	
			release of	
			negative	
			emotions	
			through	

			music that		
			express		
			these		
			emotions,		
			explained		
			humor (*1)		
			-in BPD		
			patients		
			humor was		
			one of the		
			four		
			defenses		
			that		
			predicted		
			best a faster		
			time to		
			recovery.		
Within	-PTSD (1x)	-explore use	- no (2x)	2	
Within group	-PTSD (1x) -OCD (1x)	-explore use of coping	- no (2x) -humor was	2	
				2	
group		of coping	-humor was	2	
group design,		of coping strategies	-humor was used, but	2	
group design, correlation		of coping strategies -Quality of	-humor was used, but not as much	2	
group design, correlation al,		of coping strategies -Quality of	-humor was used, but not as much as other	2	
group design, correlation al,		of coping strategies -Quality of	-humor was used, but not as much as other coping strategies as	2	
group design, correlation al,		of coping strategies -Quality of	-humor was used, but not as much as other coping	2	
group design, correlation al,		of coping strategies -Quality of	-humor was used, but not as much as other coping strategies as spirituality	2	
group design, correlation al,		of coping strategies -Quality of	-humor was used, but not as much as other coping strategies as spirituality or community	2	
group design, correlation al,		of coping strategies -Quality of	-humor was used, but not as much as other coping strategies as spirituality or	2	
group design, correlation al,		of coping strategies -Quality of	-humor was used, but not as much as other coping strategies as spirituality or community support -humor	2	
group design, correlation al,		of coping strategies -Quality of	-humor was used, but not as much as other coping strategies as spirituality or community support -humor helped to	2	
group design, correlation al,		of coping strategies -Quality of	-humor was used, but not as much as other coping strategies as spirituality or community support -humor helped to cope with	2	
group design, correlation al,		of coping strategies -Quality of	-humor was used, but not as much as other coping strategies as spirituality or community support -humor helped to cope with OCD in	2	
group design, correlation al,		of coping strategies -Quality of	-humor was used, but not as much as other coping strategies as spirituality or community support -humor helped to cope with	2	

The following information was used to select for eligibility: PICOS, follow-up and criteria to dimmish the Risk of Bias.

After selecting for eligibility 23 articles remained, of which some didn't met the criteria entirely so might be rejected in the final selection. 21 articles and 3 books

were added during the process of selecting for eligibility. Only 2 met the criteria for eligibility.

21 articles and 3 books were added to the search because of references in relevant articles.

Theoretical/ case studies : 10Empirical research : 11

In July we contacted Stephen Hayes. He has developed the ACT and conducted many scientific investigations to form a theoretical and scientific base for his theories and to provide outcome results to assess the applicability of the ACT. Because we didn't encounter any articles about outcome measurements on humorous interventions applied in the ACT, we asked whether he could recommend us scientific research on outcome measurements. He confirmed us that he doesn't know any such research. He did suggest 4 articles (included in the 21 articles mentioned above) on ACT and humor:

Chang, J., Chen, H., Hsu. C., et al. (2015). Flexible humor styles and the creative mind: Using a typological approach to investigate the relationship between humor styles and creativity.

Lovett, M. (2021). Examination of a behavior analytic intervention delivered via telehealth to teach humor comprehension to individuals with asd. Persicke A, Tarbox J, Ranick J, et al. (2013). Teaching children with autism to detect and respond to sarcasm

Pilz, R. (2019). Relations between Psychological Flexibility, Humor Styles and Pain and the Mediating Role of Well-Being.

None of them turned out to be eligible.

References

Liberati, A., Altman, D. G., Tetzlaff, J., Mulrow, C., Gøtzsche, P. C., Ioannidis, J. P. A., Clarke, M., Devereaux, P. J., Kleijnen, J., & Moher, D. (2009, July). The PRISMA statement for reporting systematic reviews and meta-analyses of studies that evaluate health care interventions: Explanation and elaboration. *PLoS Medicine*, 6(7). https://doi.org/10.1371/journal.pmed.1000100