

CANCER SURVIVORS FIND IT DIFFICULT TO THINK HYPOTHETICALLY ABOUT THEIR FUTURE CARE IN A DCE: A THINK ALOUD STUDY

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UTS BUSINESS SCHOOL

CANCER FOLLOW-UP

- After finishing cancer treatment patients have ongoing follow-up
- Follow-up services are moving to GP or nurse led care, which is effective & efficient
- Previous DCE's suggest that patients strongly prefer the status quo



DCE DEVELOPMENT



Prostate and colon cancer survivor preferences for follow-up services



ATTRIBUTES & LEVELS

Attribute	Level 1	Level 2	Level 3	Level 4
Provider & location	Local GP practice	Specialist nurse by phone	Specialist nurse in the hospital	Specialist clinician in the hospital
Continuity	Same person each time	Different person		
Emotional support	Not asked	Asked	-	-
Practical issues	Not asked	Asked	-	-
Healthy living info	Not asked	Asked	-	-
Cost	€20	€50	€100	€150

OMEF with shifted design – 4 or 8 choice sets per respondent

PRE-TESTING



- Face to face “think aloud” interviews with 17 prostate and colorectal cancer survivors
- Testing survey instrument for:
 - Wording, formatting
 - General task comprehension
 - Cheap talk script & opt out (not discussed today)
 - Usefulness of debriefing questions

DEBRIEFING QUESTIONS

Example debriefing questions	Aspect of decision making
Did you understand the concept of making choices between the [options]	Understanding
Did you find making a choice between the [options] confusing?	Understanding & preferences completeness
Did you need more information than was provided when choosing between [options]?	Using assumptions external to choice task
Did you find that the more questions you answered the easier it was to make a choice?	Using simplifying heuristics; Learning
Do you believe your choices will have an impact on [topic] in the future?	Consequentiality and task engagement
Did you consider all of the different factors that varied between the options?	Attribute non-attendance; Monotonicity of preference

PARTICIPANT DEMOGRAPHICS

Gender



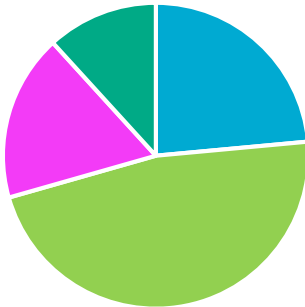
■ Males ■ Females

Age



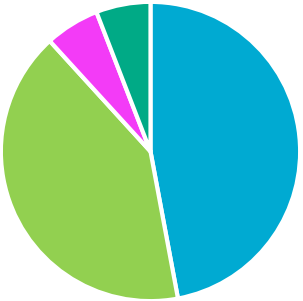
■ <50 ■ 50-59 ■ 60-69 ■ 70+

Education



■ Primary ■ Secondary
■ Third level ■ Post grad

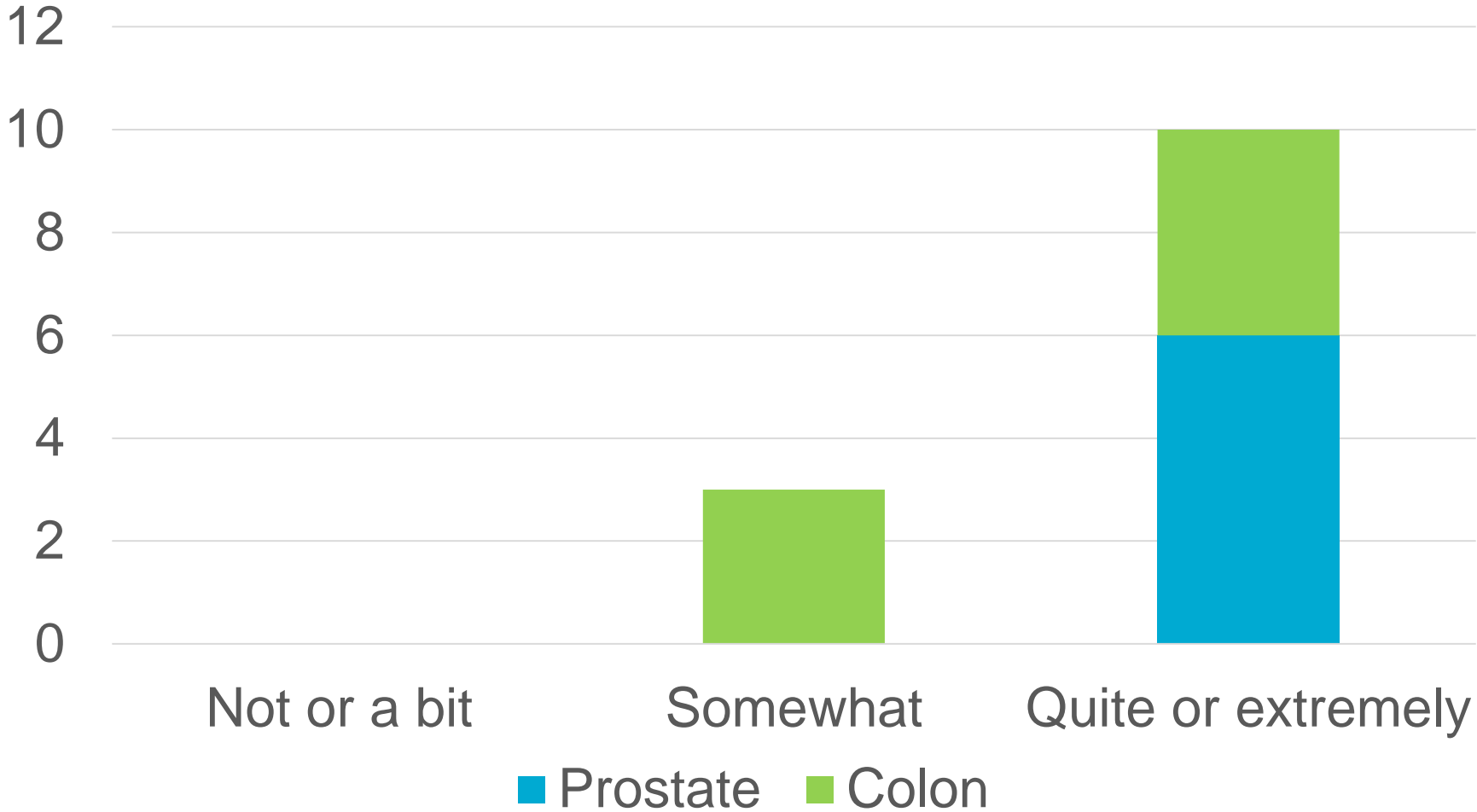
Health insurance



■ Private insurance ■ Health care card
■ Both ■ Neither

HEALTH LITERACY

Confidence filling out medical forms



RESULTS


- Cognitively challenging
- Responses inconsistent with utility maximizing assumptions
- Many would not return the survey
- Coded transcripts using an iterative process to assess decision making within and across participants (framework approach)



Group A:
Dominated
choices



Group B:
Reported
facts



Group C:
Task
unclear

GROUP A: DOMINATED CHOICES

- Compared the packages and made trade offs
- Strong status quo bias, with choices dominated by provider
- Often recoded 'unrealistic' attributes / levels (hypothetical bias)
- Confusion: choice sets look the same if only comparing one or two attributes...

Well the packages are ok, but... mmm... they seem to be the same questions in the whole lot. [C114]

GROUP B: REPORTED FACTS

- Appeared to misunderstand the choice task
- Thought we were asking them to report the facts of their follow-up
- Appeared strongly influenced by the biomedical model – difficult to imagine they might have a choice of treatment

...Well after three years now I won't have any follow-up so that will be the option I'll be taking... Mmm the others won't apply to me... [CI01]

GROUP C: TASK UNCLEAR

- Task was unclear
- Skipped choice sets, selected multiple options in each choice set, or wrote long-form answers next to choice sets

...If you want my honest reaction... I find, and maybe I'm not that bright, but I would find that mind boggling. Because, I'm trying to, I'm trying to... I'm sure that could be simplified a lot... [CI01]

COST ATTRIBUTE

Group A:
Dominated
choices

Group B:
Reported
facts

Group C:
Task
unclear

- Almost everyone ignored the cost attribute to some extent
 - “You can’t put a price on health”
 - “I won’t have to pay”
 - “You’d never have to pay that”
 - “It’s not a lot of money”
- Social norm not to admit inability to pay?

IMPLICATIONS FOR ANALYSIS

- **Group A:** Status quo would appear to be their preference
- **Group B:** Fact based choices would look like hypothetical choices, with preference for status quo
- **Group C:** 'incorrect' completion would usually lead to removal
- **All groups:** cost would appear insignificant

DEBRIEFING RESPONSES

Did you consider all of the different factors that varied between the follow-up options when you made your choices?

Please tick one box only

Yes, I always considered all factors

No, I did not always consider all factors

Don't know / couldn't say

CI19:
Survey response

Verbal response: “All the factors that were applicable, anyway”

Interviewer notes: “CI19 answered yes, even though there were a number of factors he ignored because he felt they didn't relate to him (especially cost).”

DEBRIEFING RESPONSES

Group A:
Dominated
choices

Please tell us whether there were some factors that you never, sometimes or always considered when making your choices in Section B.

Please tick one box only on each line

Factors	Never considered	Sometimes considered	Always considered
a. Who provides your follow-up care	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
b. Seeing the same person	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
c. You are asked about emotional symptoms	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
d. You are asked about practical issues	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
e. You are asked about healthy living after cancer	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
f. Cost of each follow-up appointment	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2

CI14: "Cost of follow-up... Always considered it because I was always against it"

C8. Please tell us whether there were some factors that you never, sometimes or always considered when making your choices in Section B.
Please tick one box only on each line

Group B:
Reported
facts

Factors	Never considered	Sometimes considered	Always considered
a. Who provides your follow-up care	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
b. Seeing the same person	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
c. You are asked about emotional symptoms	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
d. You are asked about practical issues	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
e. You are asked about healthy living after cancer	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
f. Cost of each follow-up appointment	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2

CI17: “Who provides... mmm... your follow-up care?
Well there’s only, never considered, sometimes considered... who provides your, well it was the, it was the, the Mercy hospital done it so like I can’t say, I...”

DEBRIEFING RESPONSES

Group C:
Task
unclear

Debrief Q: Did you understand the concept of making choices between the different follow-up options in Section B?

CI05 survey response: “Yes”

CI05 interviewer notes: “CI05 was unable to complete the choice task at all. Unable, even after prompting, to describe what he was being asked to do.”

DISCUSSION

- Cancer survivors appear to find it difficult to think hypothetically about their care
 - Status quo bias resulting from labelling effect, hypothetical bias, endowment effect (Salkeld, 2000)
 - Issues of agency
- Previous DCEs of cancer follow-up may have been effected by these same issues
- There is a need to develop and test debriefing questions that address the assumptions of decision making

CONCLUSIONS

- Cognitive interviews are a useful and appropriate way to explore decision making within the DCE context
- Pre-testing DCE survey instruments prior to implementation is essential

QUESTIONS?

