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Help-seeking Behaviors among Older Adults: A Scoping Review Protocol

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Abstract

Introduction. Despite evidence that illustrates the unmet healthcare needs of older adults, there is limited research examining their help-seeking behavior, of which direct intervention can improve patient outcomes. Research in this area conducted with a focus on ethnic minority older adults is also needed, as their help-seeking behaviors may be influenced by various cultural factors. This scoping review aims to explore the current literature on the factors associated with help-seeking behaviors of older adults, and how cultural values and backgrounds may impact ethnic minority older adults' help-seeking behaviors in different ways.

Methods and analysis. The scoping review process will be guided by the methodology framework of Arksey and O'Malley and the PRISMA-ScR guidelines. The following electronic databases will be systematically searched from January 2005 onwards: MEDLINE/PubMed, Web of Science, PsycINFO, CINAHL, and Scopus. Studies of various designs and methodologies consisting of older adults aged 65 years or older, who are exhibiting help-seeking behaviors for the purpose of remedying a physical or mental health challenge will be considered for inclusion. Two reviewers will screen full texts and chart data. The results of this scoping review will be summarized quantitatively through numerical counts and qualitatively through a narrative synthesis.

Ethics and dissemination. As this is a scoping review of published literature, ethics approval is not required. Results will be disseminated through publication in a peer-reviewed journal.

Discussion. This scoping review will synthesize the current literature related to the help-seeking behaviors of older adults and ethnic minority older adults. It will identify current gaps in research and potential ways to move forward in developing or implementing strategies that support the various health needs of the diverse older adult population.

Registration. This scoping review protocol has been registered with the Open Science Framework (<https://osf.io/69kmx>).

Strengths and Limitations of this study

- To our knowledge, no previous scoping review has explored the help-seeking behaviors of older adults or spoken to the factors that may impact ethnic minority older adults and their help-seeking behaviors differently
- This study protocol is guided by the methodology framework of Arksey and O'Malley and will follow a systematic approach to data synthesis
- The review will be limited to studies conducted in English and within the last 15 years to capture both the current health context and the dynamic nature of this topic
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Introduction

Older adults encounter a number of physical and mental health challenges that often require more attention due to their persistent and chronic nature[1]. As a result, older adults use healthcare services at higher rates and account for more of the healthcare expenditures compared to younger populations[2]. Despite this, there is concern that not all older adults adequately access healthcare services, and that this population still experiences difficulties in achieving health and have unmet needs[3]. For example, various studies have found that older adults access mental health services at lower rates than expected, and certain illnesses, such as dementia and glaucoma, continue to go underdiagnosed and undertreated for this group[3-5]. Reasons for these unmet needs remain unclear in the literature and evidence is scarce[3,6]. Woods et al.[3] suggested that unmet care needs among older adults may be attributed to either the limited offers of support from healthcare providers or the lack of acceptance of such support from older adults. Another potential contributor to this knowledge gap is the fact that most studies focus on samples of older adults who are already existing service users, thereby limiting the information available on older adults that do not seek help in the first place[6]. Consequently, there is a clear lack of research examining older adults' decision making processes prior to seeking help, as well as what alternatives to formal support services these individuals may utilize instead[6]. As such, in exploring unmet needs of older adults, understanding their help-seeking behavior is one of the direct areas where intervention can improve patient outcomes[7].

In exploring help-seeking behavior among older adults, it is important to acknowledge and explore the differing experiences of ethnic minorities, due to their continued lack of representation in clinical and health research[8]. Ethnicity itself is a topic that has far-reaching cultural effects and encompasses many social issues such as stigma and discrimination that may influence help-seeking attitudes and disparities in care. For example, among ethnic minority adolescents, studies have shown that discrimination by authorities and health care providers, traditional and cultural beliefs about mental illness, and family obligation values impact their help-seeking behavior and underutilization of services[9-11]. Furthermore, ethnic minority groups have been found to employ alternative and pluralistic help-seeking strategies as opposed to formal primary care services[12]. Given these factors explored among younger ethnic minority groups, there is reason to believe that attitudes and experiences of help-seeking for ethnic minority older adults are similarly shaped by their cultural backgrounds, values, and traditions. Subsequently, these cultural factors influence their health outcomes and the types of support that they prefer to seek out. As such, combined with the challenges that older adults already face with increasing age, there is a need to understand what factors influence ethnic minority older adults' help-seeking behavior.

This scoping review intends to explore the following research question: Which factors are associated with help-seeking behavior among older adults? This review also aims to provide answers for the following subquestion: How do cultural backgrounds, values, and differences impact help-seeking behavior among various older adult populations? Due to the exploratory nature of these questions, a scoping review will be conducted to assess the breadth of knowledge in this area. Synthesizing this literature can help researchers, healthcare providers and key decision makers understand the current state of knowledge, identify areas for future research, and determine potential ways to influence the help-seeking behavior of older adults.

Methods and analysis

This scoping review will be prepared in accordance with the Preferred Reporting Items for Systematic Reviews and Meta-analysis Protocols Extension for Scoping Reviews (PRISMA-ScR) guidelines[13]. A scoping review is a systematic way of exploring a topic area, in which main concepts and knowledge gaps are identified within a developing field of research[13]. Unlike systematic reviews, the research questions for a scoping review are often broader and more exploratory[13] and thus appropriate for this topic due to the limited research and lack of synthesized knowledge.

The review process will be guided by the five main steps set forth by Arksey and O'Malley[14]: (1) identifying the research question, (2) identifying relevant studies, (3) study selection, (4) charting the data and (5) collating, summarizing and reporting the results. The optional sixth stage, (6) consultation, will not be undertaken. This review has been registered with the Open Science Framework (<https://osf.io/69kmx>).

Step 1: Identifying the research question

For the purpose of this scoping review, the definition of help-seeking behavior will be adapted from a World Health Organization study that examined the help-seeking behavior of adolescents[15] and will be defined in the following manner[16-17]: Any action taken by an older adult who perceives themselves as having a physical or mental health challenge, with the intent to find an appropriate remedy. The type of support that individuals pursue can include seeking formal support services (e.g. from clinicians, psychologists, counselors, religious leaders) or informal support services (e.g. from family, friends, the Internet).

In keeping with the exploratory nature of scoping reviews, we identified one main research question: Which factors are associated with help-seeking behavior among older adults? As part of this, this review will also explore an additional subquestion: How do cultural backgrounds, values, and differences impact help-seeking behavior among various older adult populations?

Step 2: Identifying relevant studies

The following electronic databases will be systematically searched: MEDLINE/PubMed, Web of Science, PsycINFO, CINAHL, and Scopus. Help-seeking behavior originated from the term 'illness behavior' in medical sociology[17]. While one of the earliest definitions of help-seeking behavior was provided in 1982 and a Willingness to Seek Help Questionnaire was created in 1999, an improved General Help-Seeking Questionnaire was created in 2005 to address previous methodological and instrumental constraints[17-19]. As such, searches will be limited from January 2005 to the date of search commencement to ensure that the literature reflects the current health context and the nature of this dynamic process.

Title, abstract and keyword fields will be searched using a combination of the following terms: ("help seek*" OR "treatment seek*" OR "health information seek*" OR "healthcare seek*" OR "care seek*" OR "health seek*") AND ("older adults" OR "older people" OR "elderly" OR "seniors" OR "geriatrics" OR "immigrant older adults" OR "ethnic minority older

adults”). The reference lists of the included articles will also be reviewed to ensure that all relevant articles have been included. Additional search strategies may be incorporated as the review progresses and any additions or changes will be documented.

Step 3: Study selection

Two reviewers will screen all articles identified from the databases independently. Titles and abstracts will be reviewed based on the initial search and included based on the eligibility criteria described below. Duplicate articles will be removed, and full texts will be examined to create a final list of included studies. Any disagreements on the inclusion of any articles will be resolved through discussion and in consultation with a third reviewer if necessary.

Eligibility Criteria

Studies of various designs and methodologies (i.e. quantitative, qualitative, mixed methods design, systematic reviews, meta-analyses, literature reviews) will be considered for this review. Included studies must (1) address research on the help-seeking behaviors of older adults, (2) be published from January 2005 to the date of search commencement, (3) be printed in English, and (4) be full-text peer-reviewed studies. Articles outside of those defined in the inclusion criteria, such as opinion articles, dissertations, conference proceedings or discussion papers will be excluded.

In addition, the reviewed literature must include populations of (1) older adults aged 65 years or older, (2) community-dwelling older adults, (3) older adults experiencing a physical and/or mental health challenge, and (4) older adults exhibiting help-seeking behaviors or experiencing barriers/challenges to help-seeking. Literature including those aged less than 65 years old, hospitalized patients, older adults living in nursing homes or other long-term care facilities as well as non-human studies will be excluded.

Step 4: Charting the data

Data from the identified studies will be collected and charted according to key themes. From each eligible article, the reviewers will include authorship, year and journal of publication, the general characteristics of participants (i.e. age, gender and ethnicity), geographic location of study, study methods, the identified barriers or facilitators associated with help-seeking behaviors, limitations and any other key findings. A combination of Excel and a reference management software will be used to chart the data and to manage the screening process.

Step 5: Collating, summarizing, and reporting the results

Risk of bias will not be assessed, as this scoping review is only intended to provide an overview of the existing literature, and not to critically appraise the included articles. However, we will include a discussion of any limitations found in the included body of evidence.

The results of this scoping review will be summarized quantitatively through numerical counts (i.e. to highlight the amount and type of studies reviewed) and qualitatively through a narrative synthesis. Tables and/or charts will be used to map the study findings and provide an overview, and the screening process will be visualized through a flowchart. Given the

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3 exploratory nature of this study, any factors related to help-seeking will be considered for
4 review. Facilitators to help-seeking will be defined as any factor that has been shown to support
5 or encourage an older adult to seek help for their mental and/or physical health challenges.
6 Barriers to help-seeking will be defined as any factor that has been shown to prevent or
7 discourage an older adult from seeking help for their mental and/or physical health challenges.
8 These factors could include, but will not be limited to, the following: the presence or absence of
9 caregivers, a lack of resources, stigma, language barriers or cultural values. The discussion will
10 be structured based on the themes that emerge from the review.
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13 *Patient and public involvement*

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16 The design of this scoping review protocol did not involve patients or the public, nor will
17 they be involved in the final scoping review.
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19 **Ethics and dissemination**

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21 As this scoping review is intended to synthesize the current breadth of knowledge on the
22 help-seeking behaviors of older adults, no ethics approval is required. The results of this scoping
23 review will be disseminated through publication in a peer-reviewed journal.
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26 **Discussion**

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28 The results of this study will establish what is currently known about the help-seeking
29 behaviors of older adults. To our knowledge, this scoping review protocol is the first on this
30 topic and will identify key themes and gaps in understanding how older adults seek support for
31 their physical and mental health needs. The results in turn, can serve as the basis for future
32 research, such as a qualitative exploration of older adults' decision making processes when it
33 comes to seeking formal or informal care, a study on how existing help-seeking facilitators or
34 barriers may be influenced by the current COVID-19 pandemic, or a systematic review on
35 specific interventions or strategies that may be effective in improving help-seeking behavior
36 among various older adult populations. Through better understanding how older adults exhibit
37 help-seeking behaviors and the facilitators or barriers that encourage or discourage them from
38 seeking support, healthcare providers and program implementers can offer formal healthcare
39 services and programs that are better tailored to suit the needs of this population. Furthermore,
40 this synthesis of knowledge may also benefit older adult caregivers by highlighting additional
41 supports and formal services that older adults can turn to. In identifying alternative strategies for
42 care, such as home care services or online resources, the burden of caring for older adults does
43 not need to fall solely on their caregivers and loved ones.
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48 A secondary objective of this scoping review is to include the perspectives of ethnic
49 minority older adults and to identify how cultural influences may impact their help-seeking
50 behavior. Dissecting this information will help policy makers, healthcare decision makers and
51 program implementers decide how best to allocate limited healthcare resources, such as
52 providing them with rationale to invest in cultural competency training for staff or offering
53 programs in multiple languages. This is a significant consideration given the rates of immigration
54 and globalization worldwide and the importance of ensuring the representation of diverse
55 populations in health research[8,20]. Altogether, this synthesis of literature can support the
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development of new evidence-based practices that will address the difficulties that older adults may experience when seeking care and provide strategies of support that acknowledge the needs of the incredibly diverse older adult demographic and their varying help-seeking behaviors.

Authors' contributions: KT, RC, IR, LK, and TDC contributed to the development of this manuscript. KT conceptualized the research question, designed the study, and prepared the first draft of the manuscript. TDC helped refine the research question and provide review expertise. All authors contributed to the refining of the study design, as well as to the editing and revising of this protocol. All authors have approved the final manuscript for submission.

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Older adults encounter a number of physical and mental health challenges that often require more attention due to their persistent and chronic nature[1]. As a result, older adults use healthcare services at higher rates and account for more of the healthcare expenditures compared to younger populations[2]. Despite this, there is concern that not all older adults adequately access healthcare services, and that this population still experiences difficulties in achieving health and have unmet needs[3]. For example, various studies have found that older adults access mental health services at lower rates than expected, and certain illnesses, such as dementia and glaucoma, continue to go underdiagnosed and undertreated for this group[3-5]. Reasons for these unmet needs remain unclear in the literature and evidence is scarce[3,6]. Woods et al.[3] suggested that unmet care needs among older adults may be attributed to either the limited offers of support from healthcare providers or the lack of acceptance of such support from older adults. Another potential contributor to their unmet needs is that most studies focus on samples of older adults who are already existing service users, thereby limiting the information available on older adults that do not seek help in the first place[6]. Consequently, there is a clear lack of research examining older adults' decision making processes prior to seeking help, as well as what alternatives to formal support services these individuals may utilize instead[6]. As such, in exploring unmet needs of older adults, understanding their help-seeking behavior is one of the direct areas where intervention can improve patient outcomes[7].

For the purpose of this scoping review, the definition of help-seeking behavior will be adapted from a World Health Organization study that examined the help-seeking behavior of adolescents[8] and will be defined in the following manner[9-10]: Any action taken by an older adult who perceives themselves as having a physical or mental health challenge, with the intent to find an appropriate remedy. The type of support that individuals pursue can include seeking formal support services (e.g. from clinicians, psychologists, counselors, religious leaders) or informal support services (e.g. from family, friends, the Internet).

Within the literature, there are several models that have conceptualized help-seeking behavior. For example, the health-belief model suggests that an individual's behavior and desire to change is tied to their beliefs about their health situations and will depend on their perceived health threat or susceptibility, the benefits of change, and the support of internal or external sources (e.g. symptoms or mass media)[11-12]. In this case, individuals will use the information that they have about their health issue to decide whether they will change their behaviors[11-12]. In addition, the behavioral model of health services utilization by Aday and Andersen suggests that service use is impacted by several variables; predisposing variables, enabling variables, and need variables[12]. Expansions to this model also recognize how the environment, individual practices, and patient satisfaction can influence subsequent help-seeking behavior[12]. In this way, this scoping review will explore how these various factors may impact the diverse older adult population and discuss which factors may be more salient for this group.

In exploring help-seeking behavior among older adults, it is important to acknowledge and explore the differing experiences of ethnic minorities, due to their continued lack of representation in clinical and health research[13]. Ethnicity itself is a topic that has far-reaching cultural effects and encompasses many social issues such as stigma and discrimination that may influence help-seeking attitudes and disparities in care. For example, among ethnic minority

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3 adolescents, studies have shown that discrimination by authorities and health care providers,
4 traditional and cultural beliefs about mental illness, and family obligation values impact their
5 help-seeking behavior and underutilization of services[14-16]. Furthermore, ethnic minority
6 groups have been found to employ alternative and pluralistic help-seeking strategies as opposed
7 to formal primary care services[17]. Given these factors explored among younger ethnic
8 minority groups, there is reason to believe that attitudes and experiences of help-seeking for
9 ethnic minority older adults are similarly shaped by their cultural backgrounds, values, and
10 traditions. Subsequently, these cultural factors influence their health outcomes and the types of
11 support that they prefer to seek out. As such, combined with the challenges that older adults
12 already face with increasing age, there is a need to understand what factors influence ethnic
13 minority older adults' help-seeking behavior.
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17 This scoping review intends to explore the following research question: Which factors are
18 associated with help-seeking behavior among older adults? This review also aims to provide
19 answers for the following sub-question: How do cultural backgrounds, values, and differences
20 impact help-seeking behavior among various older adult populations? Due to the exploratory
21 nature of these questions, a scoping review of papers from any country will be conducted to
22 assess the breadth of knowledge in this area. Synthesizing this literature can help researchers,
23 healthcare providers and key decision makers understand the current state of knowledge, identify
24 areas for future research, and determine potential ways to influence the help-seeking behavior of
25 older adults.
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28 **Methods and analysis**

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30 This scoping review will be prepared in accordance with the Preferred Reporting Items
31 for Systematic Reviews and Meta-analysis Protocols Extension for Scoping Reviews (PRISMA-
32 ScR) guidelines[18]. A scoping review is a systematic way of exploring a topic area, in which
33 main concepts and knowledge gaps are identified within a developing field of research[18].
34 Unlike systematic reviews, the research questions for a scoping review are often broader and
35 more exploratory[18] and thus appropriate for this topic due to the limited research and lack of
36 synthesized knowledge.
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40 The review process will be guided by the five main steps set forth by Arksey and O'Malley[19]
41 and will follow this approximate timeline:

- 42 (1) identifying the research question - completed in Fall 2020
- 43 (2) identifying relevant studies - January-February 2021
- 44 (3) study selection - February 2021
- 45 (4) charting the data – March 2021
- 46 (5) collating, summarizing, and reporting the results – April 2021

47 We will aim to complete the optional sixth stage, (6) consultation, by consulting, discussing, and
48 verifying the results of this review with older adults. This review has been registered with the
49 Open Science Framework (<https://osf.io/69kmx>).
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52 *Step 1: Identifying the research question*

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54 In keeping with the exploratory nature of scoping reviews, we identified one main
55 research question: Which factors are associated with help-seeking behavior among older adults?
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3 As part of this, this review will also explore an additional sub-question: How do cultural
4 backgrounds, values, and differences impact help-seeking behavior among various older adult
5 populations?
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7 *Step 2: Identifying relevant studies*

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10 The following electronic databases will be systematically searched: MEDLINE/PubMed,
11 Web of Science, PsycINFO, CINAHL, and Scopus. Help-seeking behavior originated from the
12 term ‘illness behavior’ in medical sociology[10]. While one of the earliest definitions of help-
13 seeking behavior was provided in 1982 and a Willingness to Seek Help Questionnaire was
14 created in 1999, an improved General Help-Seeking Questionnaire was created in 2005 to
15 address previous methodological and instrumental constraints[10,20-21]. As such, searches will
16 be limited from January 2005 to the date of search commencement to ensure that the literature
17 reflects the current health context and the nature of this dynamic process.
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20 Title, abstract and keyword fields will be searched using a combination of the following
21 terms: (“help seek*” OR “treatment seek*” OR “health information seek*” OR “healthcare
22 seek*” OR “care seek*” OR “health seek*”) AND (“older adults” OR “older people” OR
23 “elderly” OR “seniors” OR “geriatrics”). To address the sub-question for ethnic minority older
24 adults, we will also conduct a separate analysis using a combination of the following terms:
25 (“help seek*” OR “treatment seek*” OR “health information seek*” OR “healthcare seek*” OR
26 “care seek*” OR “health seek*”) AND (“older adults” OR “older people” OR “elderly” OR
27 “seniors” OR “geriatrics”) AND (“immigrants” OR “ethnic minority” OR “minority
28 populations”). An example of the electronic search strategy for MEDLINE/PubMed has been
29 included (supplementary file). The reference lists of the included articles will also be reviewed to
30 ensure that all relevant articles have been included. Additional search strategies may be
31 incorporated as the review progresses and any additions or changes will be documented.
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35 *Step 3: Study selection*

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37 Two reviewers will screen all articles identified from the databases independently. Titles
38 and abstracts will be reviewed based on the initial search and included based on the eligibility
39 criteria described below. Duplicate articles will be removed, and full texts will be examined to
40 create a final list of included studies. Any disagreements on the inclusion of any articles will be
41 resolved through discussion and in consultation with a third reviewer if necessary.
42
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44 Eligibility Criteria

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46 Studies of various designs and methodologies (i.e. quantitative, qualitative, mixed
47 methods design, systematic reviews, meta-analyses, literature reviews) will be considered for this
48 review. English or non-English studies from any country must (1) address research on the help-
49 seeking behaviors of older adults, (2) be published from January 2005 to the date of search
50 commencement, and (3) be full-text peer-reviewed studies. Articles outside of those defined in
51 the inclusion criteria, such as opinion articles, dissertations, conference proceedings or
52 discussion papers will be excluded.
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3 In addition, the reviewed literature must include populations of (1) only older adults aged
4 65 years or older, (2) community-dwelling older adults, (3) older adults experiencing a physical
5 and/or mental health challenge, and (4) older adults exhibiting help-seeking behaviors or
6 experiencing barriers/challenges to help-seeking. Literature including those aged less than 65
7 years old, hospitalized patients, older adults living in nursing homes or other long-term care
8 facilities as well as non-human studies will be excluded.
9

10 11 *Step 4: Charting the data*

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13 Data from the identified studies will be collected and charted according to key themes.
14 From each eligible article, the reviewers will include authorship, year and journal of publication,
15 the general characteristics of participants (i.e. age, gender and ethnicity), geographic location of
16 study, study methods, the identified barriers or facilitators associated with help-seeking
17 behaviors, limitations and any other key findings. A combination of Excel and a reference
18 management software will be used to chart the data and to manage the screening process.
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21 *Step 5: Collating, summarizing, and reporting the results*

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23 Risk of bias will not be assessed, as this scoping review is only intended to provide an
24 overview of the existing literature, and not to critically appraise the included articles. However,
25 we will include a discussion of any limitations found in the included body of evidence.
26

27
28 The results of this scoping review will be summarized quantitatively through numerical
29 counts (i.e. to highlight the amount and type of studies reviewed) and qualitatively through a
30 narrative synthesis. Tables and/or charts will be used to map the study findings and provide an
31 overview, and the screening process will be visualized through a flowchart. Given the
32 exploratory nature of this study, any factors related to help-seeking will be considered for
33 review. Facilitators to help-seeking will be defined as any factor that has been shown to support
34 or encourage an older adult to seek help for their mental and/or physical health challenges[22].
35 Barriers to help-seeking will be defined as any factor that has been shown to prevent or
36 discourage an older adult from seeking help for their mental and/or physical health
37 challenges[22]. These factors could include, but will not be limited to, the following: the
38 presence or absence of caregivers, a lack of resources, stigma, language barriers or cultural
39 values. The discussion will be structured based on the themes that emerge from the review.
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42 *Patient and public involvement*

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45 The design of this scoping review protocol did not involve patients or the public, but we
46 will aim to involve older adults in the review process, consulting, discussing, and verifying the
47 results of this review.
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49 **Ethics and dissemination**

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52 As this scoping review is intended to synthesize the current breadth of knowledge on the
53 help-seeking behaviors of older adults, no ethics approval is required. The results of this scoping
54 review will be disseminated through publication in a peer-reviewed journal.
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Discussion

The results of this study will establish what is currently known about the help-seeking behaviors of older adults. To our knowledge, this scoping review protocol is the first on this topic and will identify key themes and gaps in understanding how older adults seek support for their physical and mental health needs. The results in turn, can serve as the basis for future research, such as a qualitative exploration of older adults' decision making processes when it comes to seeking formal or informal care, a study on how existing help-seeking facilitators or barriers may be influenced by the current COVID-19 pandemic, or a systematic review on specific interventions or strategies that may be effective in improving help-seeking behavior among various older adult populations. Through better understanding how older adults exhibit help-seeking behaviors and the facilitators or barriers that encourage or discourage them from seeking support, healthcare providers and program implementers can offer formal healthcare services and programs that are better tailored to suit the needs of this population. Furthermore, this synthesis of knowledge may also benefit older adult caregivers by highlighting additional supports and formal services that older adults can turn to. In identifying alternative strategies for care, such as home care services or online resources, the burden of caring for older adults does not need to fall solely on their caregivers and loved ones.

A secondary objective of this scoping review is to include the perspectives of ethnic minority older adults and to identify how cultural influences may impact their help-seeking behavior. Dissecting this information will help policy makers, healthcare decision makers and program implementers decide how best to allocate limited healthcare resources, such as providing them with rationale to invest in cultural competency training for staff or offering programs in multiple languages. This is a significant consideration given the rates of immigration and globalization worldwide and the importance of ensuring the representation of diverse populations in health research[13,23]. Altogether, this synthesis of literature can support the development of new evidence-based practices that will address the difficulties that older adults may experience when seeking care and provide strategies of support that acknowledge the needs of the incredibly diverse older adult demographic and their varying help-seeking behaviors.

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Patient consent for publication: Not required.

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Search Strategy Example

From MEDLINE/PubMed:

1. Search: (“help seek*” OR “treatment seek*” OR “health information seek*” OR “healthcare seek*” OR “care seek*” OR “health seek*”) AND (“older adults” OR “older people” OR “elderly” OR “seniors” OR “geriatrics”)

(“help seek*”[Title/Abstract] OR “treatment seek*”[Title/Abstract] OR “health information seek*”[Title/Abstract] OR “healthcare seek*”[Title/Abstract] OR “care seek*”[Title/Abstract] OR “health seek*”[Title/Abstract]) AND (“older adults”[Title/Abstract] OR “older people”[Title/Abstract] OR “elderly”[Title/Abstract] OR “seniors”[Title/Abstract] OR “geriatrics”[Title/Abstract])

2. Search: ("help seek*" OR "treatment seek*" OR "health information seek*" OR "healthcare seek*" OR "care seek*" OR "health seek*") AND ("older adults" OR "older people" OR "elderly" OR "seniors" OR "geriatrics") AND ("immigrants" OR "ethnic minority" OR "minority populations")

("help seek*" [Title/Abstract] OR "treatment seek*" [Title/Abstract] OR "health information seek*" [Title/Abstract] OR "healthcare seek*" [Title/Abstract] OR "care seek*" [Title/Abstract] OR "health seek*" [Title/Abstract]) AND ("older adults" [Title/Abstract] OR "older people" [Title/Abstract] OR "elderly" [Title/Abstract] OR "seniors" [Title/Abstract] OR "geriatrics" [Title/Abstract]) AND ("immigrants" [Title/Abstract] OR "ethnic minority" [Title/Abstract] OR "minority populations" [Title/Abstract])

Preferred Reporting Items for Systematic reviews and Meta-Analyses extension for Scoping Reviews (PRISMA-ScR) Checklist

SECTION	ITEM	PRISMA-ScR CHECKLIST ITEM	REPORTED ON PAGE #
TITLE			
Title	1	Identify the report as a scoping review.	1
ABSTRACT			
Structured summary	2	Provide a structured summary that includes (as applicable): background, objectives, eligibility criteria, sources of evidence, charting methods, results, and conclusions that relate to the review questions and objectives.	2
INTRODUCTION			
Rationale	3	Describe the rationale for the review in the context of what is already known. Explain why the review questions/objectives lend themselves to a scoping review approach.	3-4
Objectives	4	Provide an explicit statement of the questions and objectives being addressed with reference to their key elements (e.g., population or participants, concepts, and context) or other relevant key elements used to conceptualize the review questions and/or objectives.	4
METHODS			
Protocol and registration	5	Indicate whether a review protocol exists; state if and where it can be accessed (e.g., a Web address); and if available, provide registration information, including the registration number.	2,4
Eligibility criteria	6	Specify characteristics of the sources of evidence used as eligibility criteria (e.g., years considered, language, and publication status), and provide a rationale.	5-6
Information sources*	7	Describe all information sources in the search (e.g., databases with dates of coverage and contact with authors to identify additional sources), as well as the date the most recent search was executed.	5
Search	8	Present the full electronic search strategy for at least 1 database, including any limits used, such that it could be repeated.	5
Selection of sources of evidence†	9	State the process for selecting sources of evidence (i.e., screening and eligibility) included in the scoping review.	5-6
Data charting process‡	10	Describe the methods of charting data from the included sources of evidence (e.g., calibrated forms or forms that have been tested by the team before their use, and whether data charting was done independently or in duplicate) and any processes for obtaining and confirming data from investigators.	6
Data items	11	List and define all variables for which data were sought and any assumptions and simplifications made.	5-6
Critical appraisal of individual sources of evidence§	12	If done, provide a rationale for conducting a critical appraisal of included sources of evidence; describe the methods used and how this information was used in any data synthesis (if appropriate).	N/A



SECTION	ITEM	PRISMA-ScR CHECKLIST ITEM	REPORTED ON PAGE #
Synthesis of results	13	Describe the methods of handling and summarizing the data that were charted.	6
RESULTS			
Selection of sources of evidence	14	Give numbers of sources of evidence screened, assessed for eligibility, and included in the review, with reasons for exclusions at each stage, ideally using a flow diagram.	6
Characteristics of sources of evidence	15	For each source of evidence, present characteristics for which data were charted and provide the citations.	6
Critical appraisal within sources of evidence	16	If done, present data on critical appraisal of included sources of evidence (see item 12).	N/A
Results of individual sources of evidence	17	For each included source of evidence, present the relevant data that were charted that relate to the review questions and objectives.	6
Synthesis of results	18	Summarize and/or present the charting results as they relate to the review questions and objectives.	6
DISCUSSION			
Summary of evidence	19	Summarize the main results (including an overview of concepts, themes, and types of evidence available), link to the review questions and objectives, and consider the relevance to key groups.	7
Limitations	20	Discuss the limitations of the scoping review process.	7
Conclusions	21	Provide a general interpretation of the results with respect to the review questions and objectives, as well as potential implications and/or next steps.	7
FUNDING			
Funding	22	Describe sources of funding for the included sources of evidence, as well as sources of funding for the scoping review. Describe the role of the funders of the scoping review.	7

JBI = Joanna Briggs Institute; PRISMA-ScR = Preferred Reporting Items for Systematic reviews and Meta-Analyses extension for Scoping Reviews.

* Where *sources of evidence* (see second footnote) are compiled from, such as bibliographic databases, social media platforms, and Web sites.

† A more inclusive/heterogeneous term used to account for the different types of evidence or data sources (e.g., quantitative and/or qualitative research, expert opinion, and policy documents) that may be eligible in a scoping review as opposed to only studies. This is not to be confused with *information sources* (see first footnote).

‡ The frameworks by Arksey and O'Malley (6) and Levac and colleagues (7) and the JBI guidance (4, 5) refer to the process of data extraction in a scoping review as data charting.

§ The process of systematically examining research evidence to assess its validity, results, and relevance before using it to inform a decision. This term is used for items 12 and 19 instead of "risk of bias" (which is more applicable to systematic reviews of interventions) to include and acknowledge the various sources of evidence that may be used in a scoping review (e.g., quantitative and/or qualitative research, expert opinion, and policy document).

From: Tricco AC, Lillie E, Zarin W, O'Brien KK, Colquhoun H, Levac D, et al. PRISMA Extension for Scoping Reviews (PRISMA-ScR): Checklist and Explanation. *Ann Intern Med.* 2018;169:467–473. doi: [10.7326/M18-0850](https://doi.org/10.7326/M18-0850).



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