



# Developing evidence maps to identify equity issues that could inform the design of a complex public health review

2021 Cochrane Methods Symposium: Evidence synthesis in public health and complex interventions

Dr Ashrita Saran

Co-Convener, Campbell-Cochrane equity
methods group

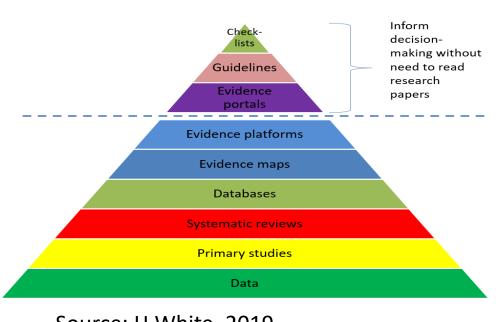
Director, Campbell South Asia



@south\_campbell

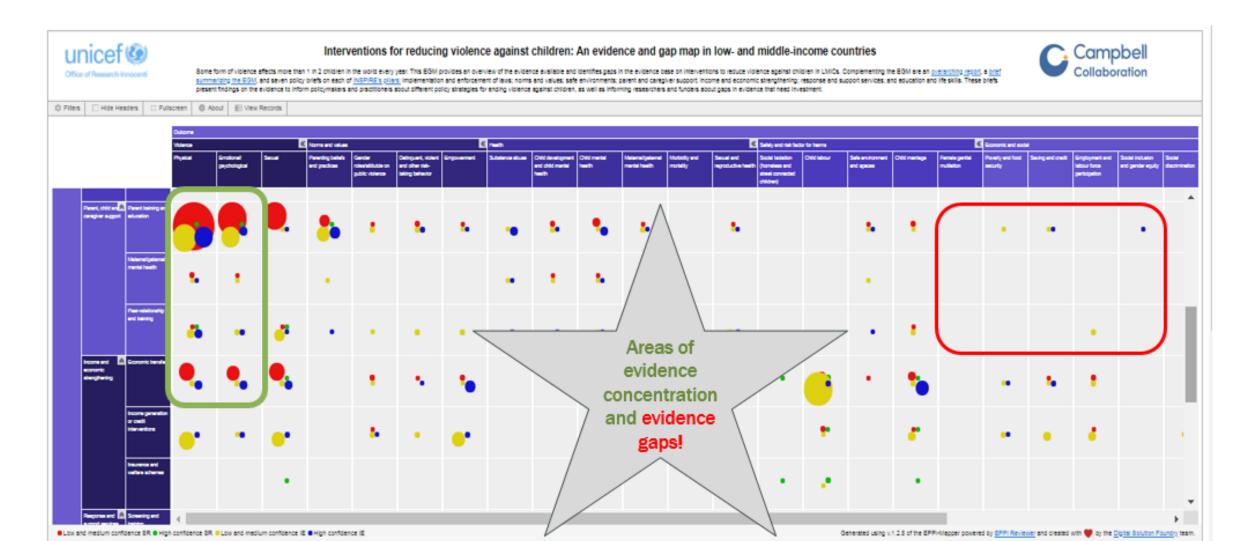
@AshritaSaran

#### Use of EGMs: a strategic approach to building evidence architecture



Source: H White, 2019

- We get evidence into use by making evidence-based decision-making products (the top three layers of the pyramid)
- ☐ But the top won't stay up without a solid base.
- ☐ Evidence maps survey the base of the pyramid in order to determine how strong is the foundations for producing top-level evidence products
- ☐ So EGMs not usually an end in themselves but a step toward further work.



Snapshot of VAC EGM

Source: https://www.unicef-irc.org/evidence-gap-map-violence-against-children/

#### The EGM framework

#### **Primary dimensions**

The row and column headings and sub-headings.

These are usually

Interventions (row headings)

**Outcomes (column headings)** 

#### **Secondary dimensions (filters)**

Study design

**Date of publication** 

**Country and region** 

Population sub groups e.g.

Women

Children

People with disabilities

Low income groups

**Humanitarian settings** 

**EQUITY** 

#### Equity considerations in evidence mapping

A majority of maps consider equity in two ways:

- 1. Maps studies of effects with an explicit equity focus on a specific dimension of inequity such as in disadvantaged population(s)
- **Example: EGM on Interventions for people with disabilities in LMICs**

- 2. Maps studies of effects not explicitly aimed reducing inequity but presents data disaggregated by gender and disability.
- \* Example: Mega map on child well being, violence against children

## Equity considerations in mapping

- Set the inclusion and exclusion criteria to assess categories of disadvantage (e.g. socioeconomic status, sex, race/ethnicity, elements of PROGRESS-PLUS)
- ❖ Develop <u>equity-focused search strategy</u>: search should include databases, terms, and concepts relevant for the equity question under consideration
- **❖** Develop a standardized data extraction tool, to code studies for the countries where they were conducted, the interventions/outcomes studied, their analysis methods, and their attention to equity.
- **\*** Have <u>equity filters for presentation</u> of the map.

#### **◆ Search term selection**

- ☐ The idea is to make your searches sensitive and equity focused
- ☐ ((social\* or disadvantage or excluded or gradient\* socio-economic status" or "women\* socioeconomic status" or "female\* socio-economic status" or socioeconomic status" or "mother\* socioeconomic status" or "maternal socioeconomic status" or "social class" or SES))
- ☐ Specific terms related to vulnerable population or poverty
- ☐ Different variants of equity\* or inequity\* or disparity\* or equality

#### **◆ Inclusion criteria**

Include studies of interventions which reports characteristics of the participants in terms of at least one socio-demographic variable (sex, race or ethnicity), socio-economic status (occupation, educational level or income), religion, place of residence or area-level index of deprivation.

Age should also be included as a socio-demographic factor if the intervention targeted vulnerable age groups (adolescents or young adults)

# Disability Evidence and Gap Map

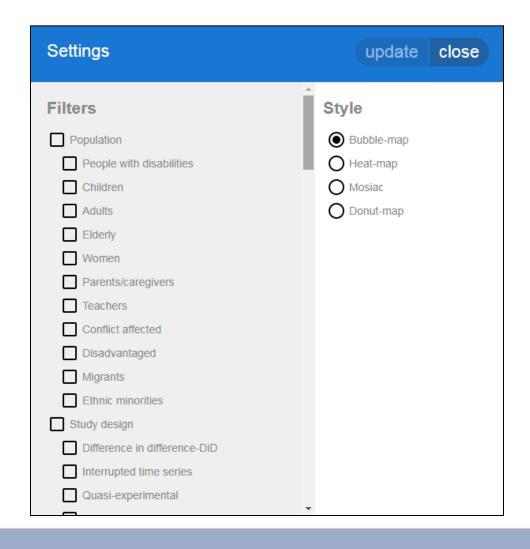
- ☐ It maps the effectiveness studies (systematic reviews and impact evaluations) on interventions to improve the well-being of people with disabilities in LMICs.
- □ Population: We included traditionally, underrepresented groups such as women, children in care, conflict settings, migrant and people belonging to ethnic minorities are relevant with respect to disabilities.
- ☐ As these population characteristics may heighten vulnerability in the face of vulnerability and may have higher prevalence of disability.

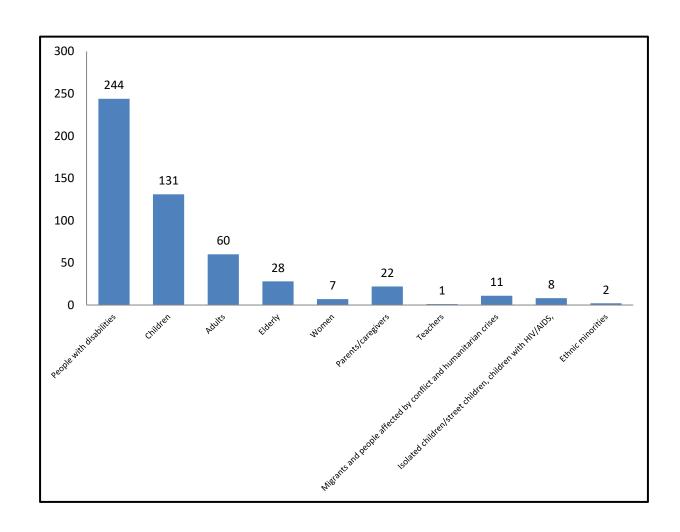
## Disability Evidence and Gap Map

☐ The 2020 update identified 108 additional studies the map now contains 274 studies, 0f these 110 are reviews and 164 impact evaluations.



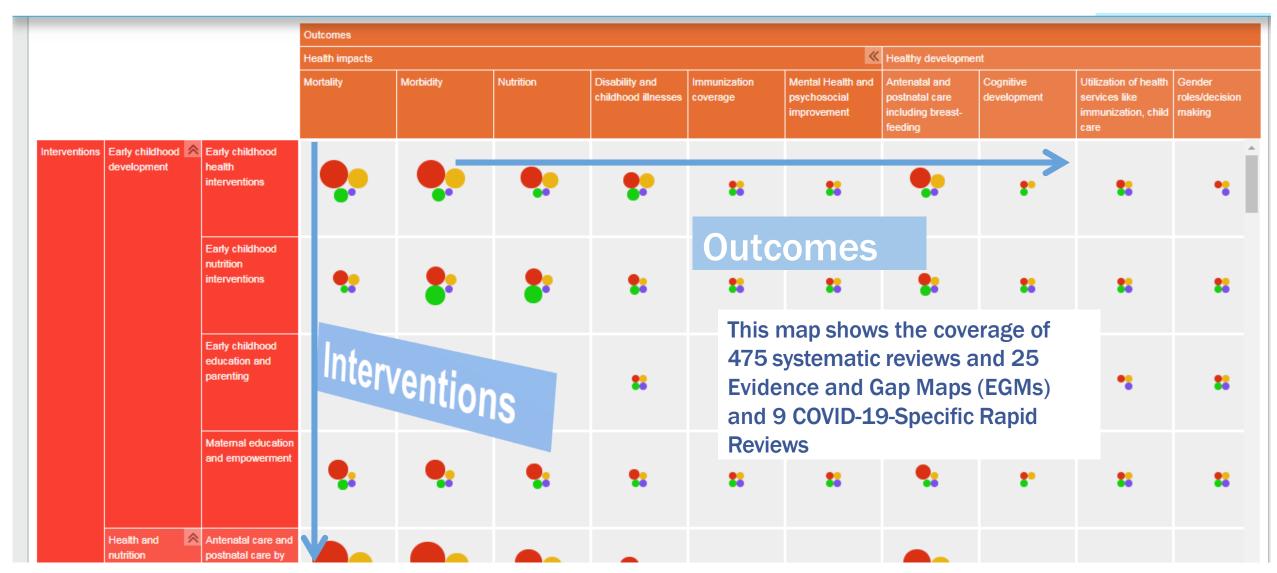
#### Present and analyze population equity gaps





## Mega Map on child well-being in LMICs

- ☐ The Campbell-UNICEF Child Welfare Mega-Map maps evidence synthesis studies evidence and gap maps and systematic reviews which report studies of the effectiveness of interventions to improve child welfare.
- ☐ The evidence is structured by intervention categories, such as health and nutrition, and outcome domains, such as morbidity.



Snapshot of Mega Map
Source: https://www.unicef-irc.org/megamap/

This 2021 identified 153 additional reviews and maps!

## Child category filters

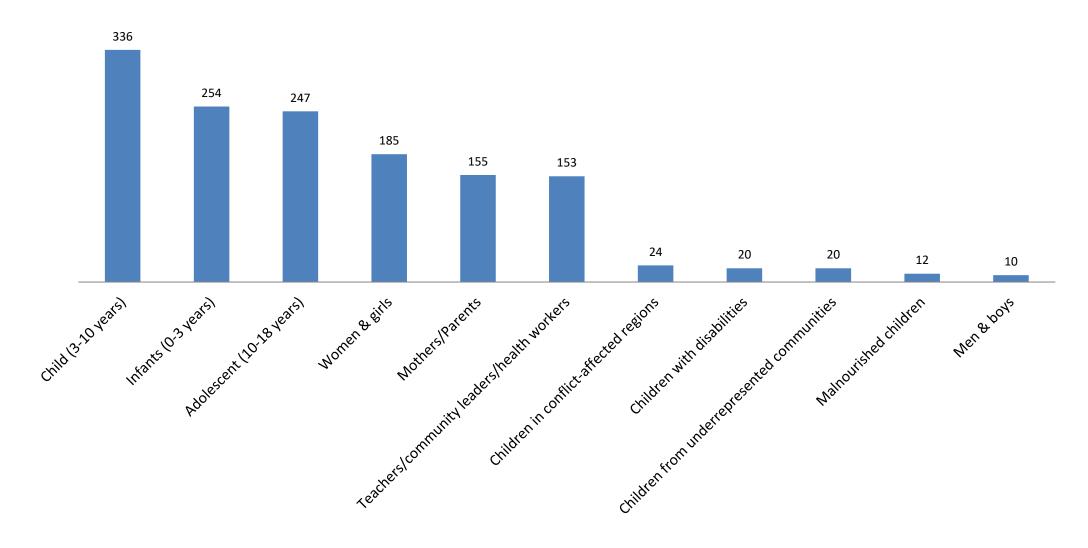
# WHO age categories

Neonate
Infants 1 month-2 years
Young child 2-6
Child 6-12
Adolescent 13-18.

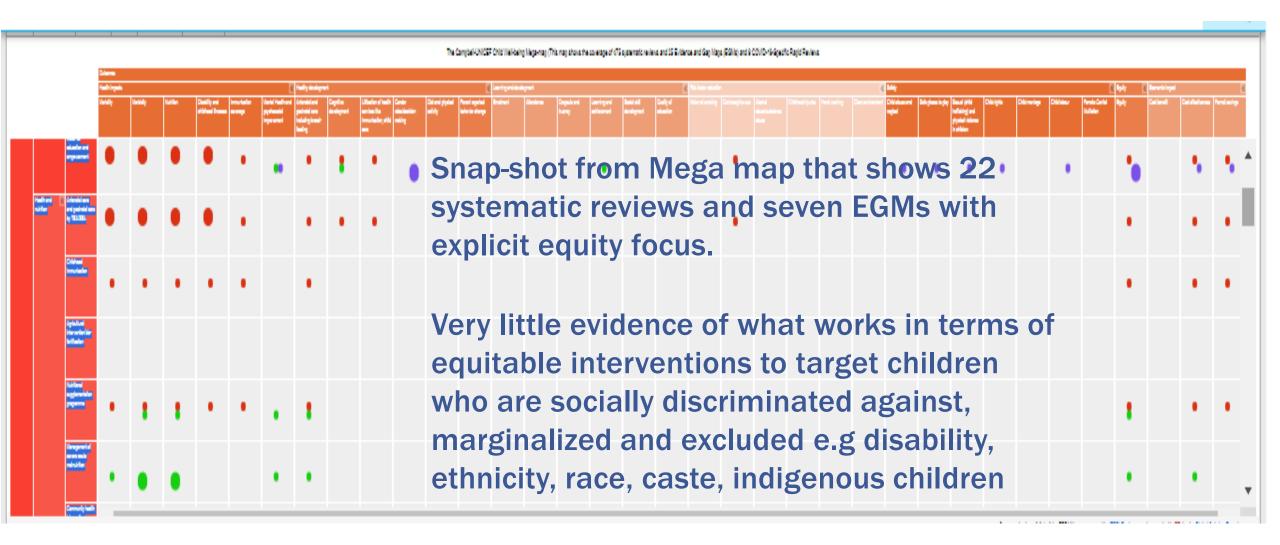
#### **Other filters**

- a) Orphans
- b) Children with disabilities c)Children belonging to ethnic minorities
- d) Child sex workers
- e) Malnourished children
- f) Child brides
- g) Isolated children/street child
- h)Children with HIV/AIDS

#### Population categories



# Studies with explicit equity focus



#### Conclusion

- ☐ Consideration of gender and equity remains relatively limited, especially for systematic reviews in these sectors.
- ☐ The evidence and gap maps help identify gaps in targeting these populations can guide users to available relevant evidence with an 'equity focus' to inform intervention and design and implementation .
- ☐ The value of additional impact evaluations and systematic reviews will increase if we use gender-responsive and equity focused research and measuring direct and differential effects on them would be important for meeting global agendas.





#### Thank you.





f campbellcollaboration