

Systematic Reviews: Case study from the HIFA virtual discussion forum



Working Group on Evidence-Informed Policy & Practice, Healthcare Information For All.

Background:

Healthcare information for All (HIFA) is a global initiative of more than 17,000 individuals in 175 countries. Under a new program called 'Evidence-Informed Policy and Practice', themed discussions are being conducted in the HIFA virtual forum. The results of the third themed discussion on "Systematic Reviews" held in 2017 for a period of six weeks are presented here.

Methodology:

The HIFA moderator introduced the topic in the first week. Every week a set of questions was sent to the forum for discussion. A thematic analysis was conducted on the 90 substantial contributions received.

Results:

Theme 1: There is variation in perceptions of SRs, from active promotion to resistance

"It's quite staggering to see how much resistance still exists to considering [SRs] as reliable sources of evidence."

- Information Professional, Bahrain

"I do not believe that the systematic review approach is the golden standard"

- Health Professional, New Zealand

"The limitations of SRs are more to do with the research base, methodology and interpretation than with the principle of SRs"

- Health Professional, UK

Theme 3: There is some confusion about what systematic reviews are

"Can anyone reflect on the differences between and among rapid review, realist review, scoping review, review of reviews, and SR?"

- Health Researcher, Bangladesh

Theme 2: Systematic reviews have increasing potential but research from LMICs is underrepresented

"I am excited to see the science of systematic reviews extending beyond statistical aggregation. Qualitative systematic reviews provide answers to questions of relevance to implementation of health interventions in the real world."

Health Professional, India

"Research from low and middle income countries rarely get into the major journals or indexes"

Health professional, Nigeria

Theme 4: Policymakers have a preference (prejudice?) for local research

"Policymakers and practitioners have a preference (prejudice?) for the findings of local research as compared with SRs. What might be done to give due weight to both global and local evidence and to use both effectively in the formulation of policy and practice?"

Health professional, UK

"Policy makers in LMICs are more interested in how the evidence can effectively feed into the flagship National programmes"

Health professional, India

Join HIFA to explore these themes further:

1. How can we better support the synthesis of SRs with local research?
2. Is there undue resistance to systematic reviews in principle? If so, why, and how can this be addressed?
3. How is the term 'systematic review' understood (or misunderstood) by the general public, by health workers, by policymakers?
4. What evidence do we have that SRs have a positive impact on policy and practice, and how can this impact be maximised?

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