

Equity Update

Campbell and Cochrane Equity Methods Group

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Volume 4, Issue 2

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Hot off the press...

Dear Equity Colleagues,

Welcome to our second newsletter of 2010. Our exciting news for this fall is the result of four years of intense methods discussions with colleagues around the world: in collaboration with the Cochrane Public Health Review Group and the WHO Commission on Social Determinants of Health Meas-

urement and Evidence Knowledge Network, we've just published guidance on equity-oriented systematic reviews in the BMJ. We'd like to thank those who contributed to our workshops, our meetings, and our discussions over the past four years: your contributions and insights proved invaluable!

We're looking forward to discussing this guidance in our upcoming Open Equity Meeting at the first Campbell-Cochrane Joint Colloquium on October 22nd. We hope to see you there!

Best regards,

The Equity Team

New Equity Guidance

Tugwell P, Petticrew M, Kristjansson E, Welch V, Ueffing E, Waters E, Bonnefoy J, Morgan A, Doohan E, Kelly MP. Assessing equity in systematic reviews: realising the recommendations of the Commission on Social Determinants of Health. BMJ. 2010 Sep 13;341:c4739. doi: 10.1136/bmj.c4739.

Institute of Gender and Health Cochrane Corner Launched

By Stephanie Coen, Jordi Pardo Pardo, Erin Ueffing

The Canadian Institute of Health Research Institute of Gender and Health (IGH) and the Campbell and Cochrane Equity Methods Group are pleased to announce the launch of the IGH Cochrane Corner. The IGH Cochrane Corner highlights reviews pertinent to

gender, sex, and health questions. It aims to introduce those working in gender, sex, and health to the methods of the Cochrane Collaboration and, reciprocally, to bring awareness of sex- and gender-based analyses to the Cochrane community. The Corner will provide a range of knowledge users with a gender- and

sex-focused entrée into the vast collection of research evidence provided through the Cochrane Library. By creating a focused collection of systematic reviews relevant to gender, sex, and health, the IGH Cochrane Corner will be a valuable tool for knowledge translation in

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Gender Corner

IGH and Cochrane

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the field.

Given the breadth of *The Cochrane Library* at over 4,000 reviews, the IGH Corner privileges recently released reviews and will eventually extend to older syntheses; the Corner is a living resource and will expand over time. The first two reviews featured in the IGH Corner focus on brief alcohol

interventions in primary care and the use of cranberries for preventing urinary tract infections.

The Corner also features an original series of Cochrane "Columns." These highlight methodological, substantive, or newsworthy issues related to sex, gender, health, and systematic reviews. The columns reflect current knowledge and activities in the field, and are

available both online and in the IGH *Intersections newsletter*. The first column will be released in fall 2010.

Visit the IGH Cochrane Corner at <http://www.cihr-irsc.gc.ca/e/42414.html>

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*We welcome your contributions—
please contact us to join our mailing
list or get involved!!*

www.equity.cochrane.org

Gender, Sex, and Health Conference Highlights Systematic Reviews

By Stephanie Coen

The Canadian Institutes of Health Research Institute of Gender and Health is holding the first ever national conference in gender, sex, and health research in Toronto on November 22-23, 2010. *Innovations in Gender, Sex, and Health Research* will showcase excellence and innovations across all domains of gender, sex, and health research, including but not limited to biomedical, clinical, health services and policy, population and public health, and social science research. The conference will highlight how accounting for gender and sex leads to improvements in health interventions, policies, and outcomes.

Knowledge translation is one of the core conference streams, and a number of concurrent sessions address various aspects of knowledge

translation, from working with communities to improving policy. Two sessions draw specific attention to the role of systematic reviews in providing evidence to support changes that take sex and gender into account. The symposium "Evidence for Equity: Health Impact Assessment, Health Indicators, and Systematic Review" features a presentation by Anne Pederson entitled "Sex, Gender, and Systematic Reviews: The Example of Wait Times for Total Joint Arthroplasty". A second concurrent session, "Bridging the Know-Do Gap: Accounting for Sex and Gender," highlights sex and gender issues in measurement, the applicability of review evidence, and methods for systematic reviews. In this session, Vivien Runnels ex-



CIHR IRSC
Canadian Institutes of Health Research | Instituts de recherche en santé du Canada

Institute of Gender and Health
Institut de la santé des femmes et des hommes

plores "To whom does the Evidence Apply?" and Erin Ueffing of the Equity Methods Group shares "Methods and Lessons Learned" in gender and sex based analysis in systematic reviews.

To learn more about the IGH conference or to register, please visit: <http://www.f2fe.com/IGH/2010/Conference/>

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To whom does the evidence apply? Sex and gender-based analysis and systematic reviews

By Marion Doull, Vivien Runnels, Madeline Boscoe, Sari Tudiver

As the Equity Methods Group continues to raise awareness about the importance of addressing health equity within systematic reviews, researchers have also been working in varying ways to improve the applicability of reviews. We would like to highlight recent work on applying sex and gender-based analysis (SGBA) to Cochrane systematic reviews in cardiovascular health. Sex and Gender-Based Analysis “is an approach which systemically inquires about biological (sex-based) and socio-cultural (gender-based) differences between women and men, boys and girls, without presuming that any differences exist.” There is growing recognition that the application of sex and gender based analysis to research is essential to good science, and can support appropriate clinical interventions, sound policy and regulation.¹⁻⁴

We developed a Sex and

Gender Appraisal Tool for Systematic Reviews to determine whether sex and gender were addressed in systematic reviews and, if so, how. The tool was positively received by reviewers at the Canadian Cochrane Symposium (Halifax, 2009). Reviewers at this meeting were enthusiastic about having access to a tool that would help them apply SGBA to reviews. The Tool has been applied to a random sample of 38 Cochrane Systematic Reviews pertaining to cardiovascular diseases and then to a random sample of 15% of the included studies (n=107) from each systematic review. Overall the Tool revealed that SGBA was limited in the sampled systematic reviews. Data were infrequently disaggregated by sex and gender analysis was rare. Importantly only one of the 107 studies reported adverse outcomes by sex and three of the 107 reported the sex of withdrawals or dropouts from the study.⁵ The primary studies mirrored the pattern observed in the reviews indi-

cating that review authors may be dealing with limited availability of data to conduct SGBA.

Next Steps

We invite reviewers and Equity Group members to provide collaborative input to refine the SGBA appraisal tool and to address the methodological challenges to integrating sex and gender into systematic reviews. Many of these challenges are relevant to subgroup analysis more generally. This collaborative work could serve to increase capacity-building for sex and gender-based analysis in systematic reviews. As important knowledge translation tools, systematic reviews should endeavour to improve upon existing research rather than reproduce the gaps in evidence that result from limited sex and gender-based analysis in primary studies. This can be done by articulating to whom the evidence *does* and *does not* apply.

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References

1. Spitzer D. Gender and Sex-Based Analysis in Health Research: A Guide for CIHR Researchers and Reviewers. Ottawa: Canadian Institutes of Health Research; 2007.
2. Health Portfolio Sex and Gender-Based Analysis Policy; 2009. Available at: www.hc-sc.gc.ca/hl-vs/gender-genre/analys/policy-politique-eng.php
3. Keuken D et al. Incorporating a gender perspective into the development of clinical guidelines: a training course for guideline developers. Implementation Science 2007;2(35).
4. National Institutes of Health. NIH Guidelines for Inclusion of Women and Minorities as Subjects in Clinical Research - Amended, October, 2001.
5. Doull M et al. Appraising the evidence: Applying sex and gender-based analysis to Cochrane systematic reviews on cardiovascular diseases. *Journal of Women's Health* 2010;19(5):1-7.

Cochrane Justice Health Field Update

Editor's Note: The Cochrane Justice Health Field became a registered entity with The Cochrane Collaboration on September 7th, 2010. Welcome to The Collaboration!

By Ajima Olaghere, Catherine Gallagher, Adam Dobrin

At the June 2010 International Network for Justice Health (INJH) conference,

team members of the recently-registered Cochrane Justice Health Field unveiled their updated beta version of the justice health libraries (JHL), an earlier version of which was featured in the 2009 Singapore Colloquium. The current library features complete reference-level information on Diabetes, Fetal Alcohol Syndrome

(FASD), Gonorrhoea, and Hepatitis B. Behind the multi-level search functions lies active databases containing the results of exhaustive literature searches by condition and relevant to the justice health population or setting. The databases are tied to the precise reference-level information and free, desk-top libraries. For

more information about the Justice Health Libraries or to browse the beta version, visit: <https://jhl.thelloydsociety.org/libSearch.php>.

In other news, team members of the new Cochrane

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Equity Update

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Justice Health Field will be heavily represented at the Joint Colloquium of the Cochrane & Campbell Collaborations in Keystone, Colorado with open meetings, oral presentations and a workshop on our open source tools for developing desktop and Cochrane CENTRAL compatible libraries that support the systematic review process. We look forward to seeing you!

Justice Health

Gallagher Catherine, Kinner Stuart, et al. [P09-23] Knowledge mapping for research prioritization: examples from the Network for Justice Health . 17th Cochrane Colloquium, Singapore, 11-14 October 2009.

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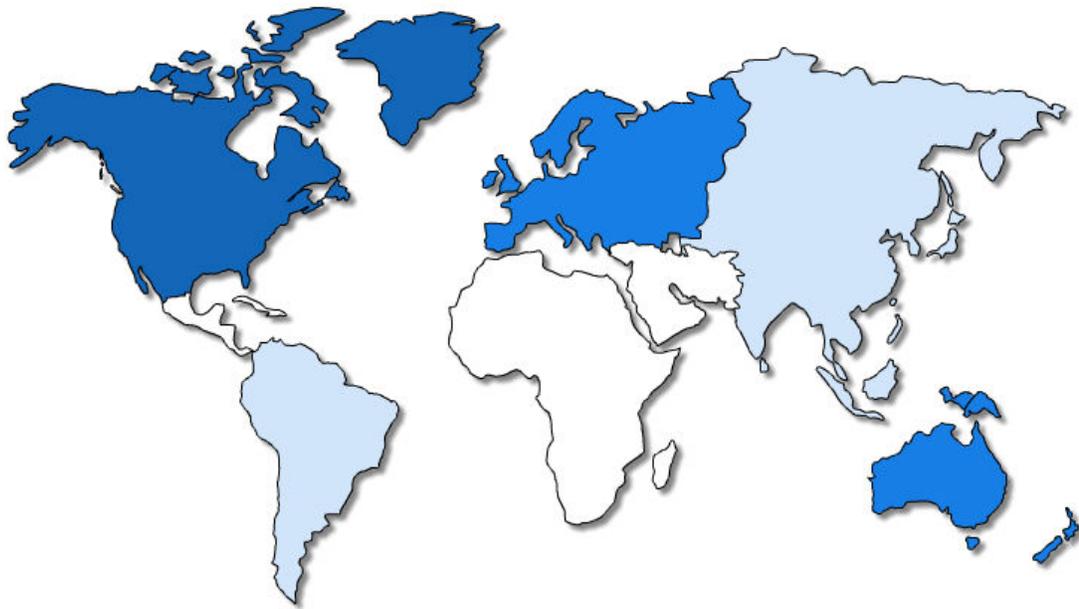


Justice Health meeting, Arizona 2010

Results Worldwide for: Diabetes

28 found

Mouse over an area to display the number of records. Click on an area to display records from that location.



Titles Found None 1 2-4 5-10 11-20 21-30 Over 30

Suggested citation: Olaghere A, Mehlman-Orozco K, Chirieleison J (2010). Knowledge mapping of diabetes research on justice-involved populations. The International Network for Justice Health, George Mason University and The Lloyd Society, 501(c)(3).

Fewest

Most

Example from The Justice Health Libraries. <https://jhl.thelloydsociety.org/maps/resultsConditionWorld.php?condition=16&rank=0&submitCondition=Map>

Equity-Oriented Toolkit for HTA: Requesting your input!

By Maria Benkhalti Jandu

The WHO Collaborating Centre for Knowledge Translation and Health Technology Assessment in Health Equity, housed at the Centre for Global Health at the University of Ottawa, is currently in the process of updating and expanding its Equity-Oriented Toolkit for Health Technology Assessment (HTA). The Equity-Oriented Toolkit is based on a needs-based model of HTA. It provides tools that explicitly consider health equity at each of the four steps of health

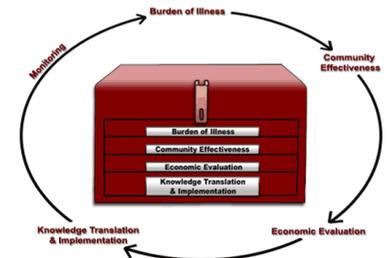
technology assessment: 1) Burden of Illness, 2) Community Effectiveness, 3) Economic Evaluation, 4) Knowledge Translation and Implementation. It also incorporates concepts of health impact assessment within the HTA process.

We are seeking suggestions on validated and widely disseminated HTA tools that explicitly consider health equity and that are relevant to the toolkit. These tools may be specific analytical methods such as the Disability-Adjusted Life Years, checklists such as the

Health Impact Screening Checklist, software programs such as the Harvard Policy Maker, databases such as The Cochrane Library, etc. For more information on the Toolkit and additional examples of tools to be included, please visit us at http://www.cgh.uottawa.ca/whocc/projects/eo_toolkit/index.htm Should you have any suggestions of tools for us to consider, please contact us.

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Non-Randomized Studies Meeting in Ottawa, June 2010

By Maria Benkhalti Jandu

The inclusion of non-randomized studies (NRS) in systematic reviews is highly debated yet crucial in many healthcare fields. The lack of methodological evidence to inform systematic reviews of other studies of health care effectiveness is important for two reasons:

1. Practitioners argue that many interventions, particularly ones in certain health care fields (e.g. public health or surgery) or which are complex, are very difficult or impossible to randomize. Consumers of health care and health care policy makers still need to make decisions about whether or not to elect to have such interventions, or to implement them in a health service.

2. Systematic reviews of randomized trials have tended to focus on the intended, beneficial effects of interventions, often neglecting to include

evidence about serious adverse effects. Because serious adverse effects tend to be rare and may occur a long time after an intervention is administered, they are very difficult to study in randomized trials. Methods for reviewing evidence on adverse effects, which are being developed by the Cochrane Collaboration's Adverse Effects Methods Group, are at an early stage of development.

In June 2010, the Cochrane Collaboration Non-Randomized Studies (NRS) Methods Group organized a three-day meeting hosted at the University of Ottawa to discuss methods and research agenda for including NRS of effectiveness into systematic reviews. The aim of the meeting was to discuss key methodological issues that arise when doing systematic reviews that include NRS. Is some evidence (irrespective of the risk of bias) always better than

none? How can the uncertainty associated with evidence from NRS be appropriately represented to policy makers? The meeting was attended by over 30 people, including national and international attendees. These represented several stakeholders including different Cochrane Collaboration Groups representatives, notably the Campbell and Cochrane Equity Methods Group, other academic research centres, and national and international funding agencies. The meeting was divided into four topics, each with two co-leaders:

1. Study design and bias – Dr. Julian Higgins and Dr. Craig Ramsay
2. Confounding and meta-analysis – Dr. Simon Thompson and Dr. Jeff Valentine
3. Selective reporting- Dr. David Moher and Dr. Susan Norris

4. Applicability – Dr. Mark Helfand and Dr. Holger Schunnenman
A set of predetermined questions for each session was debated during breakout groups and answers were reported back for further discussion. This meeting led to the formation of four working groups which will publish six manuscripts detailing the issues for each topic along with methodological recommendations and future research recommendations. These manuscripts are expected to be published in early 2011.

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Equity Events, 2010

October 18-22
First joint Cochrane and
Campbell Colloquium
(Keystone, Colorado)

October 22
Equity Methods Group's
Annual Open Equity
Meeting (Keystone,
Colorado)

**October 31-
November 3**
Canadian Conference
on Global Health 2010
(Ottawa, Ontario)

November 9
Equity 101 webinar
(online, 9:00 AM EST)

November 16-19
First Global Symposium
on Health Systems Re-
search (Montreux, Swit-
zerland)

November 22-23
Innovations in Gender,
Sex, and Health Re-
search (Toronto, On-
tario)

Health Equity through Cultural Competence in Clinical Guidelines, Nova Scotia

By Janet Rhymes for the Provincial
Programs of the Nova Scotia
Department of Health

A critical part of the work of Nova Scotia's Provincial Programs is developing clinical guidelines—roadmaps for quality care in each program area—diabetes, cancer, cardiovascular health, breast screening, hearing and speech, the blood system, renal care, reproductive care and organ and tissue donation.

In 2008/2009, we developed a *Cultural Competence Assessment Tool for Provincial Program Clinical Guidelines*.

The tool helps guideline reviewers identify and appropriately address diversity and disadvantage by listing opportunities where culture can be embedded into the process, content, and outcomes of guideline development. It is accompanied by an electronic report so observations and recommendations can be made explicit and shared among review team members. Provincial

Program staff will apply the tool when developing new guidelines or reviewing existing ones.

Our work was informed by a search for examples of cultural competence assessment in clinical guidelines. We didn't find many tools on this specific topic, but we got good advice and helpful questions from Erin Ueffing and by reviewing the *C1, C2 Equity Checklist for Systematic Review Authors* developed at the Centre for Global Health, University of Ottawa. Thanks Erin! We were also informed by other work, including the National Health Systems (NHS) Equity and Inclusion Assessment Tool (EQIA), impact assessments conducted by the National Institute for Health and Clinical Excellence (NICE), the Health Inequalities Assessment Tool (HEAT) and New Zealand examples of inclusive guidelines.

We developed a draft tool, made it more concise and then tested it with 15 of our

own guidelines. The tool was used to revise *Guidelines for Blood Pressure Monitoring and Education* for the Nova Scotia Diabetes Centres. This resulted in an expanded search for evidence by age, gender, ethnicity and disparity; more inclusive guideline recommendations; and, a more inclusive review process. Use of the tool will also lead to improved partnerships with high risk communities and enhanced data collection and outcome analysis within the Diabetes Centres.

We held two training sessions this spring on the use of the tool for Provincial Program staff. A forum on building inclusion in guideline development and implementation through partnerships with diverse community organizations will be held in the fall. The tool was also presented at the *Guidelines International Network (GIN) Conference* in Chicago in August 2010.

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[www.gov.ns.ca/health/primaryhealthcare/documents/
Cultural-Competence-Assessment-Tool-for-Provincial-Program-Clinical-
-Guidelines.pdf](http://www.gov.ns.ca/health/primaryhealthcare/documents/Cultural-Competence-Assessment-Tool-for-Provincial-Program-Clinical-Guidelines.pdf)

Webinar on Equity 101: what equity can do for you !

When is equity important? How do you address it in your review?

**Tuesday, November 9, 2010 at 9:00 AM EST
(2:00 PM in London, 3:00 PM in Geneva).**

To register, please contact Erin Ueffing (erin.ueffing@uottawa.ca)

Training Opportunity prior to Cochrane Colloquium

Conducting Cochrane reviews of public health interventions: an introduction

As part of the 2010 Cochrane Colloquium, the Cochrane Public Health Group (CPHG) together with staff from the University of Colorado, are hosting a one day introductory workshop. Several CPHG staff will introduce the work of the Group and provide an overview of how to conduct systematic reviews of public health interventions. Key areas for discussion will include: how to plan and fund a review, asking answerable questions, searching, combining sources of evidence.

Date and time: Saturday 16th October 10:00am-4:30pm

Location: Health Sciences Library, University of Colorado, Denver, Anschutz Medical Campus, Aurora, CO. For directions go to:

<http://hslibrary.ucdenver.edu/about/directions.php>

Who should attend: Cochrane Public Health Review Group authors, those interested in conducting Cochrane reviews of public health interventions and those interested in using systematic reviews to inform their public health decisions.

Registration Cost: USD85.00 (credit cards only).

Register at <http://www.regonline.com/>

CPHRG by 8th October

Morning tea, lunch and afternoon tea will be provided.

Places are limited to 35 participants so be quick!

RSVP to Jennifer McIntyre
Jennifer.McIntyre@ucdenver.edu

CPHG reviews and protocols

Published reviews

- Flexible working conditions for improving employee health and well being

Published protocols (reviews under development)

- Collaboration between local health and local government agencies for health improvement

- Community wide interventions for increasing physical activity

- Community-based interventions for enhancing access to or consumption of fruit and vegetables (or both) among five to 18-year olds

- Housing interventions for improved health and social outcomes

- Workplace-based organisational interventions to prevent and control obesity by improving dietary intake and/or increasing physical activity

Registered titles (protocols under development)

- Knowledge translation strategies for facilitating evidence-informed public health decision making among managers and policy-makers

- Community-level interventions to im-

prove food security in developed countries

- Nutritional labeling to promote healthier food purchasing and consumption

- Fortification of staple foods with vitamin A for preventing vitamin A deficiency in populations.

- Fortification of wheat and maize flour with folic acid for population health outcomes

- Condiment fortification with iron and/or other micronutrients for improving public health

- Wheat flour fortification with Iron for reducing anaemia and improving iron status in at-risk populations

- Fortification of staple foods with vitamin A for preventing vitamin A deficiency in populations,

- Population level interventions for improving health outcomes in ex-prisoners

- Interventions addressing gender disparities in family food distribution for improving child nutrition

- Oral health promotion interventions for improving child oral health

- Incentive-based interventions to increase physical activity

- Welfare to work interventions and their effects on health and well-being of lone parents and their children

Recent CPHG publications

Joyce KE, Hall BJ, Armstrong R, Doyle J, Bamba C. **Snakes and ladders: challenges and highlights of the first review published with the Cochrane Public Health Review Group.** J Public Health 2010 32: 283-285.

Baker PRA, Francis DP, Hall BJ, Doyle J, Armstrong R. **Managing the production of a Cochrane systematic review.** J Public Health 2010 32(3):448-450.

Open Equity Meeting

Friday, October 22, 8:00-9:00 AM

Joint Campbell-Cochrane Colloquium, Keystone

Spotlight Event: First Joint Campbell-Cochrane Colloquium, October 18-22, 2010

In just a few weeks, we look forward to seeing many of you at the first Joint Campbell-Cochrane Colloquium! This year's Colloquium in Keystone, Colorado (October 18-22, 2010) promises to be productive and exciting, bringing together policy-makers, researchers, patients, and practitioners from many disciplines. We hope that you can join us at our equity events!

Meet the Entities

Monday, October 18, 3:45-4:30

The Equity Methods Group will have a table at the annual "Meet the Entities" event. Please visit us to pick up a copy of our newsletter, join our listserv, and enjoy some Canadian treats. We're looking forward to meeting you!



Colorado, USA

Logic Models Workshop

Tuesday, October 19, 1:45-3:45PM

In collaboration with the Cochrane Public Health Review Group, we will be giving a workshop on complex interventions and logic models. Come learn how logic models can be used in systematic reviews and start working on one yourself.

Priority-Setting and Equity Workshop

Wednesday, October 20, 1:45-3:45 PM

Building on the success of her past workshops, Mona Nasser will be leading a workshop on "Agenda setting for systematic reviews: Evidence & Equity". Join your colleagues to learn how to make informed priorities that are inclusive, equitable, and systematic.

Equity 101 Workshop

Wednesday, October 20, 1:45-3:45 PM

Are you wondering what equity is all about? Does your review target disadvantaged populations? Join us for an introductory session on equity for systematic reviews. You'll get some tips on how to address equity, and some recommendations for building equity into your review.

Evidence for Low- and Middle-Income Countries: Workshop

Thursday, October 21, 11:15-12:45PM

Colleagues from Campbell and Cochrane will come together to address systematic reviews for low- and middle-income countries: what considerations need to be made for end-users? What must be addressed when planning your review?

Open Equity Meeting

Friday, October 22, 8:00-9:00AM

We'll be combining our two annual Open Equity Meetings into one this year at Keystone. We hope that you can join us to discuss equity activities, learn about our latest publications, debate some equity methods issues, and meet new colleagues!

Complex Reviews Workshop

Friday, October 22, 1:45-3:45PM

Join Mark Petticrew and Betsy Kristjansson to discuss "Complex reviews of community level interventions": you'll look at challenges encountered in reviews and have a chance to share your experiences.

Extrapolation Workshop

Friday, October 22, 1:45-3:45PM

How do you decide if results from a systematic review apply to your population/setting? When do review results apply to disadvantaged populations? Come to learn about our new Extrapolation Checklist, and use different scenarios to decide whether Cochrane review findings can be applied.



International Initiative for Impact Evaluation (3ie) funding opportunities

Volume 4, Issue 2

By Hugh Waddington

3ie seeks to improve the lives of poor people in developing countries by providing, and summarizing, evidence of what works, when, why and for how much. The initiative was set up in 2008 in response to the Center for Global Development (CGD) [Evaluation Gap Working Group report 'When will we ever learn?'](#), which highlighted the need for more evidence on the impact of social and economic development interventions in low- and middle-income countries.

3ie supports quality impact evaluation and systematic reviews through a grants program and quality assurance. The initiative is financing over 50 primary impact studies in developing countries to date, covering a broad range of sectors and interventions, and conducts approximately three funding rounds for primary studies each year. In addition, we provide

grants to researchers to conduct theory-based systematic (synthetic) reviews of existing evidence on development interventions. We aim to improve research capacity in developing countries, and particularly encourage research teams with members from developing countries to apply for our grants. 3ie has recently opened a UK branch at [London International Development Centre](#), where the reviews program is based.

We adopt Campbell and Cochrane standards of systematic reviewing, but stress a causal chain approach to data collection and analysis, in the context of what are usually complex interventions to change human behavior in often widely different places. In 2009/10, 3ie funded 11 [synthetic reviews](#), across interventions as diverse as water and sanitation provision, HIV prevention, community-based primary health care, interventions to improve social cohesion, school enrolment,

early childhood development, micro-credit, slum upgrading, interventions to prevent female genital mutilation and agricultural extension services.

In partnership with the UK Department for International Development (DFID) and the Australian Aid Agency (AusAID), 3ie is issuing a joint **call for systematic review proposals - deadline for applications November 2010**. This is an opportunity to impact on policy making in international development. Please visit www.3ieimpact.org for information on these funding opportunities and to find out more about impact evaluation and systematic review in international development.

For more information:
Hugh Waddington
hwaddington@3ieimpact.org

Links:

- Evaluation Gap Working Group report 'When will we ever learn?' http://www.cgdev.org/section/initiatives/_active/evalgap
- London International Development Centre <http://www.lidc.org.uk/>
- Synthetic reviews <http://www.3ieimpact.org/syntheticreviews/>
- International Initiative for Impact Evaluation (3ie) www.3ieimpact.org



Equity Support Services

Are you doing a review that considers equity? Does your review include disadvantaged populations? The Equity Methods Group is keen to help! We are happy to provide peer review, suggest Review Advisory Group members, give methodological support, and provide other assistance upon request. Please contact Erin at erin.ueffing@uottawa.ca to discuss your needs.

Sept. 14, 2010: Equity and Osteoarthritis article published

In collaboration with CMSG colleagues, the Campbell and Cochrane Equity Methods Group recently contributed to a scoping review of interventions to improve health care quality for disadvantaged populations with osteoarthritis. Led by Dr. Cornelia Borkhoff, the team found a significant evidence gap in research on intervention effectiveness for disadvantaged OA patients. The team also noted that further research is needed to determine whether interventions can reduce inequities in health care.

Borkhoff CM et al. *Reaching those most in need: A scoping review of interventions to improve health care quality for disadvantaged populations with osteoarthritis. Arthritis Care Res (Hoboken). 2010 Sep 14. [Epub ahead of print]*

Sept. 3, 2010: Leanne Idzerda wins Young Researchers Essay Competition 2010

Leanne Idzerda, contributor to the Campbell and Cochrane Equity Methods Group, was named a winner of the First Global Symposium on Health Systems Research, Global Forum for Health Research and *The Lancet's* Young Researchers Essay Competition 2010.



Regional Office of the
World Health Organization

**July 16, 2010: A partnership to improve Health Research Reporting in Latin America**

The Pan American Health Organization (PAHO) and Equator recently signed an agreement to improve reporting on

research for health in the Americas through the use of guidelines that promote greater accuracy and transparency. Under this agreement, PAHO has translated EQUATOR's guidelines on the reporting of research results and will promote their use for the benefit of PAHO member countries in Latin America. The goal of the partnership is to make more research write-ups fit for publication and use in policymaking and clinical practice. Visit [Equator \(http://www.equator-network.org/\)](http://www.equator-network.org/) [Equator in Spanish \(http://www.espanol.equator-network.org/\)](http://www.espanol.equator-network.org/).

August 25, 2010: Aiza Belen presents on Gender Analysis in The Cochrane Library

This summer, the Equity Methods Group was fortunate to have Aiza Belen working with us as a summer student. Aiza presented on her work assessing sex and gender in *The Cochrane Library* at the Institute of Population Health's weekly Research Coordination Meeting.

June 29, 2010: Sir Michael Marmot appointed President of the British Medical Association

At the annual BMA conference in June, Sir Michael Marmot was appointed as the president of the British Medical Association for the period June 2010-June 2011. He announced that the theme for his year of presidency will be health inequalities, and urged physicians to advocate for the poor and for prevention.

June 24, 2010: Equity on YouTube!

In collaboration with the Canadian Cochrane Centre and with support from PAHO, Erin Ueffing and Jordi Pardo Pardo presented a webinar on "What Equity Can Do For You!" Luis Gabriel Cuervo of PAHO has kindly created a YouTube video of the recorded webinar for us; please visit YouTube at <http://youtu.be/w6UNUjsNMWU>.

June 13-16 2010: Equity presentations at Canadian Public Health Association annual conference

Maria Benkhalti Jandu presented on the Equity Methods Group's *Equity Evidence Aid* and our equity guidelines for systematic reviews.

**June 7, 2010: CMAJ launches guideline series on immigrant and refugee health**

CMAJ (Canadian Medical Association Journal) is publishing a ground-breaking series of comprehensive new [guidelines on immigrant health](#) beginning June 7, 2010. The Canadian Immigrant Health Guidelines, a multi-part series, will assist clinicians, policy makers and immigrant communities in understanding the diverse needs of immigrants to Canada. Few resources like this exist in the international literature.

While most immigrants and refugees to Canada arrive in good health, some groups face health inequities because of preventable diseases, genetics, social and cultural influences and lack of access to medical treatment. "Immigrant specific, evidence-based clinical guidelines have been lacking in the medical literature, and these guidelines are a significant addition to the world literature on migration medicine," writes Dr. Patricia Walker, HealthPartners Center for International Health and the University of Minnesota, in a [commentary about the guidelines](#). Dr. Walker concludes "the new Canadian Immigrant Health Guidelines are relevant to all providers, as we practice patient-centred care in the global village. The long term goal of guidelines is to reduce health disparities, and the new Canadian guidelines should be rigorously implemented to help achieve this goal."

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May 31-June 1, 2010: Linking Equity Methods Research and Global Indigenous Health Research workshop

On May 31 and June 1st, 2010, the Canadian Coalition for Global Health Research (CCGHR) co-hosted a successful and productive workshop with the Centre for Aboriginal Research (CAHR). This event brought together researchers and experts in two relatively new areas of health research - equity methods research and global indigenous health research, with the goal of promoting collaborative relationships. The workshop, which took place in the CAHR, located at the University of Victoria on traditional Coast Salish territory, allowed for a posi-



Equity Methods Research and Global Indigenous Health Research, Victoria, BC

tive environment to create meaningful connections and share innovative ideas, with expectations of creating a resource (theme) group and a work plan for forwarding a global Indigenous health research agenda strengthened by health equity methods.

May 19, 2010: Cochrane Canada receives \$9.6 Million in Funding from the Canadian Institutes of Health Research

The Canadian Institutes of Health Research (CIHR) recently announced \$9.6 million in funding over the next five years to Cochrane Canada to help fulfill its mission of cultivating evidence-based health decision-making by promoting the use and accessibility of Cochrane Reviews.

The Campbell and Cochrane Equity Methods Group would like to thank CIHR, and in particular the Institute of Gender and Health, for their support of Cochrane work across Canada.

May 19-20, 2010: Equity Presentations at the Canadian Cochrane Symposium

At this year's Symposium in Ottawa, Jordi Pardo Pardo led a workshop on Equity 101, while Erin Ueffing gave a workshop on Logic Models for Complex Inter-

ventions, developed in collaboration with colleagues from the Cochrane Public Health Review Group and the Campbell and Cochrane Equity Methods Group. Vivian Welch presented on Equity Evidence Aid, and Erin presented on guidelines for equity-oriented reviews.

School Feedings Review Highlighted by DFID

The Equity Group's review of school feeding programs was cited by DFID as an example of systematic reviews in international development in their call for new systematic reviews at <http://www.research4development.info/SystematicReviewFeature.asp>

Equity Update Submissions: Seeking Your Input!

Has your group published a report on equity and global health? Are you looking for collaborators on a methods project? We would be honoured to feature your work in our next issue of Equity Update! Please contact Erin Ueffing at erin.ueffing@uottawa.ca to share your materials.

Canadian Conference on Global Health: October 31-November 3, 2010



The Canadian Conference on Global Health (Ottawa, Canada), formally known as the Canadian Conference on Interna-

tional Health, is presented by the Canadian Society of International Health under the direction of Janet Hatcher Roberts. The theme for this year's conference is "Global Health: A Humanitarian Crisis?" Plenary speakers include international experts such as James Orbinski, the former International President of Médecins Sans Frontières (MSF) / Doctors without Borders, and Mickey Chopra, the Chief of Health and Associate Director of Programmes at UNICEF. With sessions on gender equity, food security, and displaced communities, equity will be a key theme throughout the conference.

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Please contact us if you would like information about our activities, to join our listserv, or to become involved in our projects. We welcome your participation!

The Campbell and Cochrane Equity Methods Group will be presenting two sessions at the conference.

Evidence and Interventions: Equity 101 (workshop)

Tuesday, November 2, 10:30-12:30 PM

Participants will learn strategies for addressing equity in their evidence syntheses, for considering differential effects in disadvantaged populations, and for communicating equity evidence to stakeholders. Presenters will focus on different stakeholder groups and the benefits of addressing vulnerable and disadvantaged groups for each stakeholder. Participants will consider the equity implications in selected evidence syntheses.

Sex- and Gender-Based Analyses in Systematic Reviews: Methods and Lessons Learned for Equity (oral presentation)

Tuesday, November 2, 1:30-3:00 PM

There have been a number of studies conducted on the degree to which systematic reviews, particularly those published by the Cochrane Collaboration, have addressed sex and gender. These projects will be described, with a discussion of the lessons learned.

We will then provide an overview of how sex- and gender-based analyses can be included in systematic reviews. Based on methodological work conducted by our group over the past five years, we have developed guidance on the use of methods such as logic models and subgroup analyses. Specific methods for systematic reviews will be covered, with examples from Cochrane reviews, the US Task Force on Community Preventive Services, and the Canadian Guidelines on Immigrant and Refugee Health.

We will conclude with implications of sex- and gender-based analyses for evidence users such as policy-makers and practitioners.

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