Evidence and Gap Map Research Brief

UNICEF STRATEGIC PLAN 2018–2021
GOAL AREA 5: EVERY CHILD HAS AN EQUITABLE CHANCE IN LIFE

What this research brief is about
This research brief is one of a series of five briefs, which provide an overview of available evidence shown in the Campbell-UNICEF Mega-Map of the effectiveness of interventions to improve child welfare in low- and middle-income countries (LMICs). These briefs summarize evidence as mapped against the five goal areas of UNICEF’s 2018–2021 Strategic Plan, although it is anticipated that they will also be useful for others working in the child well-being space.

The purpose of the research brief is to:

- Make potential users aware of the map and its contents
- Identify areas in which there is ample evidence to guide policy and practice, and so encourage policymakers and practitioners to use the map as a way to access rigorous studies of effectiveness
- Identify gaps in the evidence base, and so encourage research commissioners to commission studies to fill these evidence gaps.

This brief provides an overview of the available evidence related to interventions to ensure every child has an equitable chance in life.

This is an update of the original 2018 version. Thanks to additional funding support from the Bill and Melinda Gates Foundation, this forms part of our commitment to make the Mega-Map and associated briefs a 'living product', updated annually and made openly available as relevant evidence evolves over the lifetime of UNICEF’s Strategic Plan 2018-2021.
Box 1: What is the Campbell-UNICEF Child Welfare Mega-Map?

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 education, nutrition and rights, and outcome domains, such as school attendance and learning outcomes.

Systematic reviews help establish which programmes are effective, for who, and in what circumstances. Evidence maps guide users to the evidence from systematic reviews and impact evaluations. The Mega-Map is an evidence and gap map (EGM) of 333 systematic reviews and 23 EGMs organized into six intervention categories and six outcome domains.

The map shows only evidence syntheses that summarize evidence from around the world. It does not show the individual studies. The map shows what evidence syntheses are available, not what the evidence says.


What evidence is included for every child has an equitable chance in life?

In the UNICEF 2018–2021 Strategic Plan, the strategic goal that every child has an equitable chance in life is most explicitly touched on in two Sustainable Development Goals (SDGs):

- SDG 5: Achieve gender equality and empower all women and girls
- SDG 10: Reduce inequality within and among countries

However, equity cuts across the development goals and strategic goal five is also addressed by other SDGs. For example, there is explicit reference to people with disabilities in four of the SDGs, such as ‘guaranteeing equal and accessible education by building inclusive learning environments and providing the needed assistance for persons with disabilities’ in SDG3.

Many of the reviews in the map may present data disaggregated by, for instance, gender or disability. For example, a review of the economic effects of conditional cash transfers (CCTs) finds that CCTs reduce child labour for boys more than for girls, unless the transfer is explicitly targeted at girls (Kabeer, 2012).

However, this brief focuses on reviews with an explicit equity focus. That is, reviews that either address equity or focus on a disadvantaged group, such as people with disabilities.

There are thirteen such studies in the Mega-Map, which are listed in Table 1. Figure 1 shows the distribution of the studies by intervention category (some studies are in more than one category).

Figure 1: Number of studies by intervention category and study quality

![Figure 1: Number of studies by intervention category and study quality](https://www.campbellcollaboration.org/funding/global-funds/child-welfare-global-fund.html)
<table>
<thead>
<tr>
<th>Equity term</th>
<th>No.</th>
<th>Titles</th>
</tr>
</thead>
<tbody>
<tr>
<td>Equity/equality</td>
<td>2</td>
<td>Targeted interventions for improved equity in maternal and child health in low- and middle-income settings: a systematic review and meta-analysis (<a href="#">Malqvist, 2013</a>)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Girls Education and Gender Equality (<a href="#">Unterhalter, 2014</a>)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Cognitive behavioral therapy for post-traumatic stress disorder, depression, or anxiety disorders in women and girls living with female genital mutilation: A systematic review (<a href="#">Adelufosi, 2017</a>)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>What impact does the provision of separate toilets for girls at schools have on their primary and secondary school enrolment, attendance and completion (<a href="#">Birdthistle, 2011</a>)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Providing access to economic assets for girls and young women in low-and-lower middle-income countries (<a href="#">Dickson, 2012</a>)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Girls Education and Gender Equality (<a href="#">Unterhalter, 2014</a>)</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>What are the impacts of approaches to increase the accessibility to education for people with a disability across developed and developing countries and what is known about the cost-effectiveness of different approaches? (<a href="#">Bakhshi, 2013</a>)</td>
</tr>
<tr>
<td>Disability</td>
<td>1</td>
<td>Interventions to reduce prejudice and enhance inclusion and respect for ethnic differences in early childhood: A systematic review (<a href="#">Aboud, 2012</a>)</td>
</tr>
<tr>
<td>Ethnic, race</td>
<td>1</td>
<td>Services for street-connected children and young people in low and middle-income countries (<a href="#">Coren, 2016</a>)</td>
</tr>
<tr>
<td>Street-connected children</td>
<td>1</td>
<td>What are the effects of different models of delivery for improving maternal and infant health outcomes for poor people in urban areas in low income and lower middle countries (<a href="#">Coast, 2012</a>)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Unconditional cash transfers for reducing poverty and vulnerabilities: effect on use of health services and health outcomes in low- and middle-income countries (<a href="#">Pega, 2017</a>)</td>
</tr>
<tr>
<td>Poor, poverty, disadvantage</td>
<td>5</td>
<td>Academic Intervention Programmes for Improving School Outcomes for Educationally Disadvantaged Youth and Low Achieving Students in Grade 7 to 12: A Systematic Review (<a href="#">Eiberg, 2014</a>)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>School feeding for improving the physical and psychosocial health of disadvantaged students (<a href="#">Kristjansson, 2006</a>)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Food Supplementation for Improving the Physical and Psychosocial Health of Socio-economically Disadvantaged Children Aged Three Months to Five Years: A Systematic Review (<a href="#">Kristjansson, 2015</a>)</td>
</tr>
<tr>
<td>Minority, indigenous, discrimination</td>
<td>0</td>
<td></td>
</tr>
</tbody>
</table>
As for the Mega-Map as a whole, reviews explicitly addressing the goal of ensuring every child has a chance to an equitable life are concentrated in health and nutrition, and education. There is just one study with respect to early child development and none at all for social protection or rights and governance.

Approximately half (six out of 13) of the studies are rated as high quality (see Endnote on quality rating).

The evidence and gap map shows what evidence is there but not what it says. However, to give a taste of the evidence contained in the studies, Box 2 summarizes the evidence of selected studies related to education.

Box 2: Ensuring every child has an equal chance in education. Findings from selected reviews.

School feeding has positive effects on both attendance and learning outcomes (Kristjansson, 2006).

There is a considerable evidence base on increasing girls’ participation in education (Untherhalter, 2014). Well targeted interventions that provide additional resources and support teachers can have positive effects. However, there is no evidence on the effects of separate girls’ toilets (Birdthistle 2011). There is also a lack of rigorous studies on changing gender norms (Untherhaler, 2014).

There are no rigorous studies in developing countries of inclusive education for children with disabilities (Bakhshi, 2013).

What outcomes are reported?

The 13 reviews identified as addressing equity report a broad range of outcomes (see Table 1). Most of these outcomes relate to health and education. However, there are also a number related to the UNICEF goal that every child is protected from violence and exploitation, with child abuse and neglect being reported in three of the 13 studies.

Where is the evidence from?

Systematic reviews are often global in scope. We included in the map all reviews for which studies from developing countries were eligible for inclusion, whether or not there were actually any studies from developing countries included. The screening process did not check whether the review actually included studies from developing countries. An example of a global review is Kristjansson (2006) School feeding for improving the physical and psychosocial health of disadvantaged students, which includes nine studies from low- and middle-income countries and nine from high-income countries.

However, given the nature of the topic, several reviews in this area have a focus on developing countries e.g. Coast (2012) What are the effects of different models of delivery for improving maternal and infant health outcomes for poor people in urban areas in low income and lower middle countries; and Dickson (2012) Providing access to economic assets for girls and young women in low-and-lower middle-income countries.

<table>
<thead>
<tr>
<th>UNICEF Goal</th>
<th>Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Every child survives and thrives</td>
<td>Mortality (3) Morbidity (3) Nutrition (5) Disability and childhood illness (3) Immunization coverage (1) Mental health and psychosocial improvement (5) Antenatal care including breast feeding (2) Maternal smoking (1) Utilization of health services like immunization and childcare (1)</td>
</tr>
<tr>
<td>Every child learns</td>
<td>Enrolment (6) Attendance (6) Learning and achievement (6) Drop-outs and truancy (2) Quality of education (2) Social skills development (1) Cognitive development (4)</td>
</tr>
<tr>
<td>Every child is protected from violence and exploitation</td>
<td>FGM prevalence (1) Child abuse and neglect (3) Child marriage (1) Gender role and decision making (4)</td>
</tr>
</tbody>
</table>
Where are the evidence gaps?

The clear gap is the small number of reviews focusing explicitly on either equity or programmes for disadvantaged groups and those who are discriminated against. If governments and international agencies are to design and implement policies and programmes to ensure that every child has an equitable chance in life, a stronger evidence base is needed.

The available evidence syntheses are mostly in the areas of health and education. More is needed in those areas but more still is needed in other areas where there are no studies. For example, no reviews were found regarding evidence for effective interventions for children from indigenous groups.

Implications of findings

There is a substantial research agenda to uncover what is known about successful – and unsuccessful – approaches to promoting more equitable development. This brief has identified reviews that focus on this. Other reviews may also contain relevant evidence; however, it would be necessary to delve into the review contents in more detail in order to map this information. A next step could be to produce an equity-focused version of the Mega-Map to allow identification of which reviews present evidence disaggregated for priority groups.

Whatever this equity-augmented version of the Mega-Map shows, it is clear that more reviews are needed to support this goal in the UNICEF Strategic Plan.

How can the map be used by UNICEF?

The evidence base for ensuring that every child has an equitable chance in life is very thin. Whilst UNICEF staff and partners can draw on the lessons from the evidence identified in this brief, the brief’s main use should be to motivate staff to identify priority areas for which new evidence synthesis and new primary studies should be commissioned.

Endnote: Assessing the quality of systematic reviews

For systematic reviews we score each study using the 16 item checklist called AMSTAR 2 (‘Assessing the Methodological Quality of Systematic Reviews’). The 16 items cover: (1) PICOS in inclusion criteria, (2) ex ante protocol, (3) rationale for included study designs, (4) comprehensive literature search, (5) duplicate screening, (6) duplicate data extraction, (7) list of excluded studies with justification, (8) adequate description of included studies, (9) adequate risk of bias assessment, (10) report sources of funding, (11) appropriate use of meta-analysis, (12) risk of bias assessment for meta-analysis, (13) allowance for risk of bias in discussing findings, (14) analysis of heterogeneity, (15) analysis of publication bias, and (16) report conflicts of interest.

Items 2, 4, 7, 9, 11, 13 and 15 are termed ‘critical’. Study quality is rated high if there is no more than one non-critical weakness, and medium if there is no critical weakness but more than one non-critical weakness. Studies with one or more critical weaknesses are rated low quality.
REFERENCES


Bakshi, P., Kett, M., and Oliver, K. (2013). What are the impacts of approaches to increase the accessibility to education for people with a disability across developed and developing countries and what is known about the cost-effectiveness of different approaches?.

Birdthistle, I. (2011). What impact does the provision of separate toilets for girls at schools have on their primary and secondary school enrolment, attendance and completion?: A systematic review of the evidence.

Coast, E., McDaid, D., Leone, T., Pitchforth, E., Matthews, Z., Lemmi, V. and Jones, E. (2012). What are the effects of different models of delivery for improving maternal and infant health outcomes for poor people in urban areas in low income and lower middle income countries?


About this UNICEF Research Brief

This research brief was prepared by Howard White and Ashrita Saran with the assistance of Yashika Kanojia, Campbell Collaboration. The production of the brief benefited from technical inputs provided by Kerry Albright, Lawrence Chandy, Priscilla Idele and Alessandra Ipince, UNICEF. Funding to support its production was provided by UNICEF’s Office of Research-Innocenti. Comments may be sent to info@campbellcollaboration.org or research@unicef.org

@UNICEFInnocenti

Research for Children at Innocenti