

Citation

Enrico Bellazzecca, Rachel Baker, Marcello Bertotti, Karen Galway, Antony Morgan, Liam O'Hare, Michael J. Roy, Sam Porter. CommonHealth Assets: a protocol for a realist review of reviews of the health and wellbeing impact of community led organisations in disadvantaged communities. PROSPERO 2021 CRD42021287959 Available from:

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Review question

- a) What evidence is there that community led organisations (CLOs) improve health and wellbeing?
- b) What is it about the activities of CLOs that generate improved health and wellbeing?
- c) What aspects of the structure, culture and resources of CLOs support or inhibit the effectiveness of activities intended to improve health and wellbeing?
- d) What aspects of the administrative and policy context within which CLOs operate support or inhibit their effectiveness in improving health and wellbeing?
- e) How do stakeholders tend to respond to and experience CLOs activities in their contexts?

Searches

Academic outputs will be systematically searched through the following databases: Web of Science, MEDLINE, Cochrane Library, ASSIA, PsycLit. Where required, manual snowballing will be also conducted iteratively to better inform emerging theories. The search strategy is informed by key concepts from the research questions and will be operationalized through combinations of search terms according to a PICO framework.

Non-peer-reviewed reviews will be located through Google and key UK knowledge repositories including National Institute for Health and Care Excellence (NICE), British Library Social Welfare Portal; Social Care Online, King's Fund, Mental Health Foundation, National Council for Voluntary Organisations (NCVO) and Nesta. Key informants will also be asked to identify reviews.

Types of study to be included

This review will include systematic, realist and other types of reviews focusing on assets-based approaches to improving health and wellbeing, and reducing health inequalities. These will include studies that evaluate, among other assets-based approaches to public health, the activities and interventions of CLOs operating in disadvantaged areas and tackling health and social needs. Intervention studies will include randomised and non-randomised designs, observational studies and qualitative studies.

Reviews that do not relate to place-based, community governed and owned organisations will be excluded.

Condition or domain being studied

Assets-based approaches to public health improvements and reducing health inequalities.

Rationale for this review:

Deprivation and social inequalities are prime determinants of ill health and health inequalities (ScotPHO, 2018). Communities are seen as part of the solution and partners in public health improvements and reducing health inequalities. Assets based approaches recognise that health and wellbeing are enhanced by

individual, community and organisational assets (Bortel et al., 2019). Research is dominated by case studies and there is a lack of substantial, testable theories that can guide large-scale, theory-driven empirical research to evidence how community assets improve health and wellbeing (Rifkin, 2014). This realist synthesis of review studies will help to address that gap.

The focus of this realist synthesis will be on community-led organisations (CLOs) (place-based, community governed and owned), which have social missions that reflect the social determinants of health (Roy et al., 2014). CLOs vary in terms of the social needs they address and in their constitutions but can be seen as a 'family of interventions' (Macaulay et al., 2017). They are characterized as taking assets-based approaches, working with rather than for; mobilising people, skills, relationships, environmental and material assets, to improve wellbeing in local populations (Caló et al., 2019).

Participants/population

Participants will include general population groups from disadvantaged communities which are affected by health inequalities.

Intervention(s), exposure(s)

The activities of CLOs (place-based, community governed and owned) working with social missions that impact upon health and wellbeing.

Comparator(s)/control

CLOs vary in terms of the social needs they address, the methods they use to address them and in their constitutions. As such, traditional comparators or the use of controls may not be appropriate.

Main outcome(s)

A range of health-related outcomes of CLOs will be included. We will adopt the World Health Organisation's definition of health: "a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity". Based on this, examples of outcomes may include general self-reported physical health, quality of life, capabilities, life satisfaction, sense of coherence, mental health and well-being, social isolation and loneliness.

Additional outcome(s)

This realist review will also concentrate on harvesting information in relation to the hypothesized mechanisms embedded in the interventions being examined as well as factors in the context that the interventions operate that are hypothesized to either enhance or inhibit their effectiveness.

Data extraction (selection and coding)

Studies will be saved in Zotero. Duplicates will be removed. Outputs will be scanned by title then abstract by at least two researchers (Mateen et al., 2013). Full text of relevant review studies will be assessed independently by at least two researchers. Review studies which do not include any 'intervention' studies of CLOs operating in disadvantaged areas will be excluded. RAMESES publication standards for realist syntheses/reviews (Wong et al., 2013) will guide the assessment of review studies explicitly drawing upon realist approaches to evidence synthesis. The whole studies selection process will undergo iterative double-checking. Any outputs for which there is no agreement between the two researchers will be discussed within the whole research team.

The following data will be extracted from each review study:

- 1) Author(s);
- 2) Title;
- 3) Year of publication;

- 4) Country of lead author's institution;
- 5) Academic or grey literature;
- 6) Aim and objectives of the study; types of 'intervention' studies included;
- 7) Types of CLOs evaluated;
- 8) Target population;
- 9) Theoretical lens used (if any);
- 10) Review and synthesis methods used;
- 11) Rigor
- 12) Theory-building potential to inform testable programme theories concerning the following:
 - 12a) Outcome
 - 12b) Programme mechanism (i.e. the activities of CLOs that improved health and wellbeing).
 - 12c) Inner contextual mechanism (i.e. the structure, culture and resources of CLOs that support or inhibit the effectiveness of activities intended to improve health and wellbeing);
 - 12d) Outer contextual mechanism (i.e. administrative and policy context within which CLOs operate that affect their effectiveness in improving health and wellbeing);
 - 12e) Agency (stakeholders' responses to and experiences of CLO activities in their contexts?).

Single 'intervention' studies of CLOs will be snowballed from review studies considered of poor theory-building potential (data 12) to inform data 12a-12e. Data extraction will be conducted by at least two researchers. One researcher will conduct the initial extraction and theoretical analysis. A second researcher will conduct a triangulating extraction and analysis.

Risk of bias (quality) assessment

The rigor of the review studies and the risk of bias will be assessed using two appraisal tools. The primary tool will be the realist-oriented tool, TAPUPAS (Pawson et al., 2003). Critical Appraisal Skills Programme (CASP UK) checklist tool for systematic reviews (n.d.) will be a subsidiary tool to assess specifically the risk of bias in outcome reporting. CASP scores will not be used as criteria for excluding studies.

Strategy for data synthesis

The data will be managed through an Excel spreadsheet and shared with the whole research team for discussion and iterative examinations and refinement of emerging findings (i.e. theories). Data synthesis will be thematic and structured narratively to advance different refined and testable middle range theories explaining how community assets such as CLOs improve health and wellbeing. Theories will be developed by looking at patterns across the data extracted from the review studies and, if needed, single 'intervention' studies. Contradictory findings will be used to inform alternative explanations (i.e. rival middle range theories). Where the reviewers deem that more detailed information than is provided in the review is required, the pertinent studies in the examined review will be hand-searched and included.

Analysis of subgroups or subsets

Sub-group analysis of review studies or sampled 'intervention' studies (if applicable) might be also conducted, for example, according to geographical setting (e.g. rural versus urban) and type of CLOs (e.g. working integration services, transport services, skills development services). However, it is difficult at the stage of this protocol to ensure the feasibility of this type of analysis.

Contact details for further information

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Type and method of review

Systematic review, Other

Anticipated or actual start date

01 December 2021

Anticipated completion date

28 February 2022

Funding sources/sponsors

This study is funded by the National Institute for Health Research (NIHR) Public Health Research programme [NIHR 129118]. The study sponsor is Glasgow Caledonian University. The sponsor has no role in the design, conduct or reporting of the study. The funder and sponsor have not been directly involved in the study design and will not be directly involved in study delivery. The funder will approve the protocol before the project starts.

Conflicts of interest

Language

English

Country

England, Italy, Northern Ireland, Scotland

Stage of review

Review Ongoing

Subject index terms status

Subject indexing assigned by CRD

Subject index terms

Empirical Research; Government; Health Status Disparities; Humans; Public Health; Sexual Partners; Social Determinants of Health; Socioeconomic Factors

Date of registration in PROSPERO

29 October 2021

Date of first submission

28 October 2021

Stage of review at time of this submission

| Stage | Started | Completed |
|---|---------|-----------|
| Preliminary searches | Yes | No |
| Piloting of the study selection process | No | No |
| Formal screening of search results against eligibility criteria | No | No |
| Data extraction | No | No |
| Risk of bias (quality) assessment | No | No |
| Data analysis | No | No |

The record owner confirms that the information they have supplied for this submission is accurate and complete and they understand that deliberate provision of inaccurate information or omission of data may be construed as scientific misconduct.

The record owner confirms that they will update the status of the review when it is completed and will add publication details in due course.

Versions

29 October 2021