A Knowledge Repository of Reviews Evaluating Public Health Interventions

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What is www.healthevidence.org?

Evidence

Decision Making
The 6S Search Pyramid Tool

- **Systems**: are electronic systems which can be sophisticated enough to link to patient records and to prompt practitioners about guidelines for care.

- **Summaries**: provide an outline of management options for a given health issue. Summaries incorporate the highest quality and most synthesized sources of research evidence.

- **Synopses of Syntheses**: summarize the findings and implications of high quality systematic reviews.

- **Syntheses**: are systematic reviews that provide a rigorous summary of all primary research evidence that could be found relevant to a particular focused question.

- **Synopses of Single Studies**: provide brief summaries of results and implications of single high-quality studies.

- **Studies**: are related to a particular focused question.
Helping public health use best evidence in practice since 2005
Global Reach
Search Strategy

**Monthly updates**
- MEDLINE
- EMBASE
- CINAHL
- PsychINFO
- Cochrane
- Health Systems Evidence
- Nursing+

**Annual updates**
- BIOSIS
- SPORTDiscus
- Sociological Abstracts
# Relevance Criteria

## Instructions for completion:

- Check **Yes** or **No** for each criterion. The article must satisfy all criteria in order to be included in the registry.
- Please record whether additional references are to be retrieved.
- Complete the quality assessment tool for relevant reviews.

## CRITERIA

<table>
<thead>
<tr>
<th>CRITERIA</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Is this a review article?</td>
<td></td>
<td></td>
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<tr>
<td>2. Is the review relevant to public health or health promotion practice?</td>
<td></td>
<td></td>
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<tr>
<td>3. Is the effectiveness of an intervention/program/service/policy the subject of the review?</td>
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<tr>
<td>4. Is evidence on outcomes included?</td>
<td></td>
<td></td>
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<tr>
<td>5. Is the search strategy described?</td>
<td></td>
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</table>

## REVIEWER DECISION

<table>
<thead>
<tr>
<th>Include this review in registry? (If yes, complete quality assessment tool)</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>
Quality Appraisal

### Later school start times for supporting the education, health, and well-being of high school students

#### Review Quality Rating: 9 [strong]  - View Quality Assessment

#### Evidence Summary

**Citation:** Marx, R., Turner-Smith, E.E., Davison, C.M., Uffele, L.A., Freeman, J., Shankar, R., et al. (2017). Later school start times as a means of avoiding the potentially negative impacts that early morning times have on adolescent students. Even mild sleep deprivation has been associated with significant negative educational concerns: Increased risk for accidents and injuries, impaired learning, aggression, memory loss, poor self-esteem, and changes in metabolism. Although researchers have begun to explore the effects of delayed school start time, no one has conducted a rigorous review of evidence to determine whether later school start times support adolescent health, education, and well-being.

#### Abstract

**BACKGROUND:** A number of school systems worldwide have proposed and implemented later school start times as a means of avoiding the potentially negative impacts that early morning times have on adolescent students. Even mild sleep deprivation has been associated with significant negative educational concerns: Increased risk for accidents and injuries, impaired learning, aggression, memory loss, poor self-esteem, and changes in metabolism. Although researchers have begun to explore the effects of delayed school start time, no one has conducted a rigorous review of evidence to determine whether later school start times support adolescent health, education, and well-being.

#### Simplified Quality Assessment

<table>
<thead>
<tr>
<th>1. Clearly focused PICO</th>
<th>✓</th>
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<tbody>
<tr>
<td>2. Clearly outlined inclusion criteria</td>
<td>✓</td>
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<tr>
<td>3. Comprehensive search strategy</td>
<td>✓</td>
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<tr>
<td>4. Adequate duration of search strategy</td>
<td>✓</td>
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<tr>
<td>5. Level of evidence clearly illustrated</td>
<td>✓</td>
</tr>
<tr>
<td>6. Quality assessment of included studies conducted</td>
<td>✓</td>
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<tr>
<td>7. Quality assessment of included studies transparent</td>
<td>✓</td>
</tr>
<tr>
<td>8. Appropriate combining of results across studies</td>
<td></td>
</tr>
<tr>
<td>9. Appropriate weighting of results across studies</td>
<td>✓</td>
</tr>
<tr>
<td>10. Author interpretation of results supported by data</td>
<td>✓</td>
</tr>
</tbody>
</table>

**TOTAL SCORE: 9/10**

[View Complete Quality Assessment](#)
Health Evidence™ Registry

Searching for Evidence

- Advanced search
- Keyword search
Health Evidence™ Registry

Results for: (obesity prevention) AND Limit:
- Date = Published from 2007 to 2018
- Population = Adolescents (13-19 years)
- Setting = School

Returned 50 results

<table>
<thead>
<tr>
<th>Article</th>
<th>Authors</th>
<th>Date</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Interventions to prevent global childhood overweight and obesity: A systematic review</td>
<td>Bleich S. et al.</td>
<td>2017</td>
<td></td>
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<tr>
<td>3. Effectiveness of educational and lifestyle interventions to prevent paediatric obesity: Systematic review and meta-analyses of randomized and non-randomized controlled trials</td>
<td>Gor D. et al.</td>
<td>2017</td>
<td></td>
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</table>
Later school start times for supporting the education, health, and well-being of high school students: Evidence and implications for public health

Review on which this evidence summary is based:

Review Focus

**P**
High school students (age 13 to 19 years)

**I**
Later school start times (8:00am-10:30am; start time delayed by 60-90 minutes)

**C**
Early school start times (7:00am-7:30am)

**O**
Primary Outcomes: Student academic outcomes, amount or quality of sleep, mental health, truancy/attendance, alertness.

Secondary Outcomes: outcomes related to health behaviours (e.g. BMI score, waist circumference, body fat percentage), health and safety indicators (e.g. vehicular accidents), social outcomes (social support, peer relationships), family outcomes, school outcomes, community outcomes, adverse events/unintended consequences.

Review Quality Rating: 9 (strong) Details on the methodological quality are available [here](#).

Considerations for Public Health Practice

<table>
<thead>
<tr>
<th>Conclusions from Health Evidence™</th>
<th>General Implications</th>
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Evidence and Implications

<table>
<thead>
<tr>
<th>What’s the evidence?**</th>
<th>Implications for practice and policy</th>
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Sharing Evidence

- Monthly Evidence Service
- Monthly Newsletter
- Webinars
- Social Media
  - Twitter
  - Facebook
  - LinkedIn
  - YouTube
  - SlideShare
1. Saves you time
2. Relevant & current evidence
3. Transparent process
4. Supports for EIDM available
5. Easy to use

www.healthevidence.org
Challenges

1. Time intensive
2. Expensive to maintain
3. Monotonous
4. Staff training
5. Scope creep/diligence
6. Extracting relevant data
7. Transfer to local practice
Questions?

Contact Us: info@healthevidence.org