**Title:** Exclusion of community-led initiatives by publication bias: evidence from a systematic scoping review of community engagement in the UK

**Authors:** Anne-Marie Bagnall, Jane South, Jo Trigwell, Karina Kinsella, Kris Southby

**Introduction:**

A recent systematic review found that initiatives with high levels of community engagement may produce more positive health outcomes than those with lower engagement. Systematic reviews in this area risk publication bias because (i) literature on community based health initiatives is widely dispersed and poorly indexed; and (ii) professionally-led (top down) interventions are more likely than community-led (bottom up) interventions to be formally evaluated and published.

An opportunity to examine the gap between research and practice arose in a systematic scoping review commissioned by the UK National Institute of Health & Care Excellence (NICE), of current practice in community engagement.

**Methods:**

We searched specialised research registers and websites; literature searches and citations from recent relevant systematic reviews; and direct calls for evidence via networks of community practitioners and groups. Records were screened independently by more than one reviewer, and included if published after 2000, relevant to the UK and evaluated or described community engagement in public health. Included records were coded for type, level and extent of community engagement, indicators of disadvantage, issues and outcomes.

**Results:**

316 articles were included, 72% were research or evaluation studies (7% were randomised controlled trials; most were mixed methods or qualitative studies). 26% were found through website searches and the calls for evidence. The issues addressed most frequently were social capital or social cohesion (41%) and community wellbeing (35%). Indicators of health inequality observed most frequently were socioeconomic (39%) and “other” (39%), including people with disabilities; refugees and asylum seekers; mental health service users. Only 33 initiatives reported a high extent of community engagement; a comparatively high proportion were in the non-research literature (20% of non-research articles, compared to 8% of research articles). This may indicate a gap between organisations which usually write and publish research articles, and organisations which fully involve community members, and/or may indicate challenges in the evaluation or publication process of high community engagement initiatives.

**Conclusions:**

Using conventional systematic review methods to examine community based approaches risks overlooking community-led “bottom up” initiatives, which may have the highest potential to reduce health inequalities. Reviewers should therefore make every effort to find reports of such initiatives, and consider widening their definition of “evidence”.