

## Guide to Using Insufficient Evidence (IE) Findings from the Community Preventive Services Task Force (Task Force)

The Task Force presents three categories of findings based on systematic reviews of peer-reviewed literature for intervention approaches that aim to improve behaviors, services, programs or policies.

Insufficient Evidence (IE) finding means there is not enough evidence to recommend for or against use of an intervention. This does not mean the intervention does not work. Either not enough research is available or the results are too inconsistent to make a firm conclusion about effectiveness. This document is designed to help public health practitioners interpret and use IE findings.

| TASK FORCE FINDING         | DEFINITION  |
|----------------------------|---|
| Recommended                | Evidence exists that the intervention is effective.   |
| Insufficient Evidence (IE) | Available studies do not provide sufficient evidence to determine if the intervention is or is not effective. |
| Recommended Against (RA)   | Evidence exists that the intervention is harmful or not effective.  |

### Understanding the Evidence

IE findings are best understood when practitioners closely examine the systematic review to do the following:



#### 1 Understand the Question(s) Posed in the Review:

Consider whether the topic of interest is the focus of the systematic review. It may be that the context for the review is different than that faced by a potential user, or that the question is more narrowly or broadly defined in relation to the issue. If a mismatch exists, consider consulting other sources of evidence to see if someone has addressed the same topic. For example, a question about intervention effectiveness for use in minority populations may not be addressed by a Task Force question focused on intervention effectiveness in the general population.



#### 2 Consider Why the Systematic Review of Evidence Resulted in an IE Finding:

Examine the Task Force assessment of the full body of evidence to understand the reason for an IE finding. Not all IE findings are “equal” since they may be based on a variety of factors including too few studies, poor quality of evidence, inconsistent study findings, and methodological limitations. These reasons can be cited as the basis for a determination of IE, alerting potential users to consider the implications of using the intervention in practice, as the basis for new research, and/or as guidance for making funding decisions.



#### 3 Examine Individual Studies in the Review:

Review individual studies included in the systematic review to see if one or more studies match the area of research or practice interest, setting, population, or program/policy intent. If one or more studies align with interests, assess whether the individual studies demonstrated a positive effect, were of high quality, were unbiased, and used rigorous methods. By weighing the relative advantages and disadvantages of the intervention as described in the studies, practitioners or funders may decide to support its implementation. The Task Force encourages those who use interventions deemed as IE to evaluate their efforts. Researchers may decide to replicate a study or use its findings to justify new lines of research to add to the body of evidence.

## Making Decisions Based on the Evidence

When considering how to use Task Force findings, focus first on using recommended interventions suitable for the issue of concern, appropriate for the population or community being served, and feasible within program and policy constraints. Similarly, users are advised to not use an intervention that the Task Force recommends against. If a recommended intervention for the topic of interest is not found, consider examining IE findings related to the issue. The reasons for IE findings can inform decisions about the use of interventions by practitioners.

**Practitioners may ask** *“Is there a place for an intervention with an IE finding in our daily practice setting?”* Public health professionals in the field are often tasked with finding and using evidence-based interventions to address population-based health issues. By their very nature, the effectiveness of interventions labeled as IE is not unequivocally supported by the available literature - thus, practitioners should carefully consider the reasons for the IE finding before deciding to use the intervention. For example, if the reason for the IE finding is poor quality of evidence, concern regarding use of the intervention is warranted. If the reason for the IE finding is that more studies are needed to recommend the intervention, there may be less concern about its potential use. The example in this User Guide illustrates one approach to pairing recommended interventions with IE interventions for a practice-based program.

### Using IE Findings: An Example from the Field

All Task Force findings are available online and can be filtered to show only IE findings (<https://thecommunityguide.org/task-force-findings>). Of the interventions reviewed by the Task Force for breast and cervical cancer screening, five had insufficient evidence (see Table 1).

Group education was recommended for breast cancer screening, but had insufficient evidence of effectiveness for cervical cancer screening although the results for the cervical cancer studies were generally favorable. Program developers decided to provide group education for both cancers despite the IE finding for cervical cancer. The Task Force also found insufficient evidence for the effectiveness of reducing out-of-pocket costs to increase screening for cervical cancer; nonetheless, consistently favorable results for intervention strategies that reduce costs for breast cancer screening and several other preventive services suggest that such intervention strategies are likely to be effective for increasing cervical cancer screening as well. *Since the reason for IE findings for these specific intervention strategies was not that they caused danger or harm to study participants, but that the number of studies in the literature was too small, program developers built a successful cancer screening program by strategically selecting intervention strategies with an IE finding and pairing them with recommended interventions.*

In rural South Carolina, where many African American women have limited access to lifesaving medical screenings, the risk of cancer-related death is a complex public health problem. After being introduced to The Community Guide, one community health center in the state confronted this challenge head on. Using a combination of Task Force recommended clinic and community-based intervention strategies, the St. James-Santee Family Health Center launched Black Corals, a program to increase breast and cervical cancer screenings and help local women take charge of their health.

<https://thecommunityguide.org/stories>

**TABLE 1. INTERVENTIONS USED BY THE BLACK CORALS PROGRAM**

| Intervention  | Task Force Finding |          | IE Finding Rationale  |
|---|--------------------|----------|---|
|   | Breast             | Cervical |   |
| Mass Media<br>Client Incentives<br>Provider Incentives  | IE                 | IE       | Too few studies.  |
| Group Education   | R                  | IE       | Small numbers of studies with methodologic limitations.<br>Inconsistent findings.<br>Results generally favorable. |
| Reducing Structural Barriers  | R                  | IE       | Small number of studies (3) with methodologic limitations.  |
| Reducing Client Out of Pocket Costs   | R                  | IE       | Too few studies.  |
| Client Reminders<br>Small Media<br>Provider Assessment and Feedback<br>Provider Reminder and Recall Systems<br>One-on-One Education | Recommended        |          |   |