

Bilaga 2 Tabeller över beskrivning av ingående systematiska översikter (hög eller medelhög kvalitet) (included systematic reviews).

Table 1 Main characteristics of included systematic reviews with high moderate or study quality.

First author Year Country Reference	Objectives Population	Intervention Comparison Outcome	Number of included studies (participants) Countries (origin of the included articles) Year the search was executed	Main results and the estimated level of evidence according to authors	Risk of bias assessed by SBU Comment
Campbell et al. 2016 UK [1]	To review qualitative studies reporting lone parents' accounts of participation in welfare to work (WtW), to identify explanations and possible mechanisms for the impacts of WtW on health and wellbeing.	Intervention: welfare to work comparison groups not applicable Outcome Analytical themes	Qualitative studies n=16 Studies were from USA, Canada, UK, Australia, and New Zealand. 2013	WtW reduced control over the nature of employment and care of children. Access to social support allowed some lone parents to manage the conflict associated with employment, and to increase control over their circumstances, with potentially beneficial health impacts.	Medium

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	Lone parents and their dependent children living in OECD countries with established social welfare systems (no gender information)				
De Vet et al. 2013 Netherlands [2]	To review the literature on standard case management (SCM), intensive case management (ICM), assertive community treatment (ACT), and critical time intervention (CTI)	SCM, ICM, ACT, CTI All outcome measures that were included in randomised controlled trials and quasi-	Randomised controlled trials or quasi-experimental studies comparing case management to other services. n=21 (33 publications)	The authors found little evidence for the effectiveness of ICM. SCM improved housing stability, reduced substance use, and removed employment barriers for substance users. ACT improved housing stability and was cost-effective for mentally ill and dually diagnosed persons. CTI showed promise for housing, psychopathology, and	Medium

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	Homeless adults 18 years or older (no gender information)	experimental studies (e.g. housing stability, substance use, employment cost-effectiveness, psychopathology) comparing these models to other services for the general homeless population or specific homeless subgroups.	Studies were from UK and USA 2011	substance use and was cost-effective for mentally ill persons. More research is needed on how case management can most effectively support rapid rehousing approaches to homelessness.	

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Filges et al. 2013 Denmark [3]	<p>The objective of this systematic review is to assess current evidence on the impact of exhaustion of benefits on employment.</p> <p>Unemployed individuals who receive some sort of benefit during their unemployment spell. These benefits may be in the form of unemployment insurance (UI) or social assistance</p>	<p>The intervention is benefits exhaustion. That is, unemployment or social assistance benefits with an exhaustion date.</p> <p>The no-treatment control group is comprised of unemployed individuals not faced with benefit exhaustion.</p>	<p>n=47 (65 publications)</p> <p>Studies were from 19 countries (2 from Sweden and 2 from Norway, 1 from Finland).</p> <p>2011</p>	<p>In this review we have found clear evidence that the prospect of exhaustion of benefits results in a significantly increased incentive for finding work but only shortly (one and two months) prior to exhaustion and at the time of exhaustion. A significant benefit exhaustion effect is the result of a meta-analysis where we pooled measures from seven different European countries, the US, and Canada. Thus, the theoretical suggestion that the prospect of exhaustion of benefits results in a significantly increased incentive for finding work has been confirmed empirically by measures from a</p>	<p>Low</p>

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	(SA). (Gender specific studies were identified)	<p>Primary outcome: employment probability for the individual just prior to unemployment benefit exhaustion</p> <p>Secondary outcome: employment duration, if the studies report such information. Gender</p>		<p>variety of countries. Hence, shortening the benefit eligibility period may reduce the share of long and unproductive job searches.</p> <p>No gender differences were identified though no overall conclusion were drawn because the analysis is based on a subset of the studies used in the data synthesis.</p>	

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		differences were compared.			
Mawn et al. 2017 UK [4]	Objective: Synthesis of the literature on the effectiveness of interventions targeting young people not in employment, education, or training (NEET). The population of interest was young people aged between 16 and 24 years who were not in employment or education	Randomised controlled trials and quasi-experimental studies. Any intervention that was delivered to the NEET population was included, whether targeted solely at NEET individuals or targeted at a	n=18 Studies were from UK, USA, Australia, Argentina, Colombia. 2016	There is some evidence that intensive multi-component interventions effectively decrease unemployment amongst NEETs. The quality of current evidence is limited, leaving policy makers under-served when designing and implementing new programmes, and a vulnerable population neglected. Subgroup effects emerged for gender differences, whereby, trials identified a significant effect on employment, a reduction in welfare receipt, and no short-term (i.e. <18	Low

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	(or training) at the time of the intervention commencing. Males, from 33 to 67 %.	larger group of unemployed individuals but reporting effects on NEET individuals separately. Other control or comparison group (including usual treatment controls). The primary outcome was employment; secondary		months) wage suppression for females only. No estimated level of evidence presented.	

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		<p>outcomes included earnings, welfare receipt, education, health, and other behaviors (e.g. drug use).</p> <p>Subgroup gender analysis.</p>			
Smedslund et al. 2006 Norway [5]	To estimate the effects of work programmes, including elements such as job search assistance, job search training, subsidised employment, job clubs, vocational training, etc. on	Interventions intended to help welfare recipients become self-sufficient typically come as	A total of 46 programmes with more than 412 thousand participants were	Welfare-to-work programmes in the USA have shown small, but consistent effects in moving welfare recipients into work, increasing earnings, and lowering welfare payments. The results are not clear for reducing the proportion of	Low

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	<p>welfare recipients' employment and economic self-sufficiency.</p> <p>Welfare recipients. This includes both persons who already receive welfare and people who applied for welfare. People who receive food stamps were also included. We excluded persons entitled to unemployment benefit and persons with pensions of any kind.</p> <p>Males, Mean 11.3 % (9 out of 10 were female).</p>	<p>"Packages" involving several components. Therefore, it is usually not possible to measure the effect of one component apart from the effect of the other components of the programme. We included interventions that offered one or more of the</p>	<p>included in this review.</p> <p>Studies were mainly from USA (2 from Canada)</p> <p>2005</p>	<p>recipients receiving welfare. Little is known about the impacts of welfare-to-work programmes outside of the USA.</p> <p>Lone parents are usually women. The few males are either unemployed men in two-parent families with small children or heads of single-parent families. No specific level of evidence presented about gender differences.</p>	

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	Specific studies with females only.	following: time limited work experience, job search assistance, remedial education, job clubs, financial incentives, time limits on financial support, or vocational training. The interventions could be either mandatory or voluntary. In a voluntary			

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		programme random assignment takes place after individuals volunteer, and in a mandatory programme volunteering does not take place at all; individuals who meet certain criteria are simply randomly assigned.			

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		<p>The main control or comparison condition was ordinary (passive) social economic assistance or the usual services available to welfare recipients.</p> <p>Primary Outcomes:</p>			

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		Work status, earnings or welfare Payments Secondary Outcomes: skills and satisfaction, adverse effects			

ACT = Assertive community treatment, CTI = Critical time intervention, n =number of studies or participants, ICM = Intensive case management, SA = Social assistance, SCM = Standard case management, UI = Unemployment insurance, WtW = Welfare to work

Referenser

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