



# Functioning and disability

## An evidence map

## Executive summary

A comprehensive literature research resulted in 19 234 articles. In the first stage, these articles abstract were reviewed and 2 031 of them were considered as relevant. After full text review, 1 750 articles out of 2 031 were considered to be irrelevant. In total, SBU has identified 281 relevant systematic literature reviews. 232 of these were assessed to have low methodological quality, 44 medium high and 5 high methodological quality.

Most of the total of 49 systematic reviews with medium or high methodological quality concerned the groups of neuropsychiatric disabilities (24 systematic reviews), and next of kin or other close relatives of persons with disabilities (21 systematic reviews). This is followed by intellectual disabilities (11 systematic reviews) and mental disabilities (8 systematic reviews). For the group of physical disabilities, there are fewer systematic reviews with medium or high methodological quality (5 systematic reviews). No systematic reviews of medium or high methodological quality were identified regarding the group's dyslexia, dyscalculia, language impairment, multifunctional impairment and sensory impairment

Systematic reviews that were identified and assessed as relevant, and of medium or high methodological quality, were distributed in relation to domains. It was then assessed whether there was scientific knowledge or scientific knowledge gaps in the domain. The assessment of whether there is scientific knowledge, or a scientific knowledge gap was made for the group of persons with disabilities.

Scientific knowledge was identified for the group:

- Neuropsychiatric disability in 8 of 17 domains.
- Mental impairment in 4 of 17 domains.
- Intellectual disability in 4 of 17 domains.
- Physical disability in 2 of 17 domains.

Scientific knowledge gaps were identified for the group:

- Mental disability in 13 of 17 domains.
- Neuropsychiatric disability in 9 of 17 domains.
- Intellectual disability within 13 of 17 domains.
- Physical disability in 15 of 17 domains.

Since there were no systematic reviews of medium or high quality in any of the domains for the groups of sensory impairment, dyslexia, dyscalculia, language impairment, and multifunctional impairment, there are, according to SBU:s definition, scientific knowledge gaps in all 17 domains.

The domains where most scientific knowledge gaps were found for most disability groups were:

- Autonomy-related interventions
- Housing-related interventions
- Interventions that promote parental ability
- Motivation oriented interventions
- Transport related interventions

### Background

In Sweden there are a number of different actors working with interventions in the area of disability. Municipalities, states, and regions map, investigate, make decisions and carry out, together with private and non-profit actors, efforts on a daily basis. This survey applies to systematic overviews of interventions and methods implemented, or that could be implemented, by the social service (eg personal assistance, home service, daily activities) and other municipal administrations (which handles, for example, housing adaptation), and government interventions such as assistance payments, car support and special support staff for introduction – and follow-up support.

Systematic reviews that studied methods and interventions in the health care area, including habilitation, rehabilitation, everyday interpretation and assis-

tive aids, as well as in school and education, working life and criminal services are excluded.

A method or practice is an evidence gap if:

- Systematic reviews, with medium high or high methodological quality, find that there is no conclusive evidence of benefits or harms (Very low certainty of finding according to GRADE or corresponding, no primary studies identified).
- No systematic review, with medium high or high methodological quality, have reviewed the method.
- The breadth and scope of this evidence map means that the identified domains, or parts of them, may be relevant to all disability groups, while others may be primarily designed for, or targeted to, certain specific disability groups. The results regarding scientific knowledge gaps must therefore be supplemented with assessment based on specific expertise to determine to what extent domain constitutes a scientific knowledge gap for a specific disability group.

Scientific knowledge or scientific knowledge gaps were not established for systematic reviews dealing with interventions aimed at next of kin or other close relatives of persons with disabilities, neither of methods used by professionals in the area of disabilities. The same applies to systematic reviews whose results are based on qualitative data, or primary studies with a pre- and post-design with one or a few survey subjects.

The lack of evidence does not mean imply that the associated methods have no effect. It simply means that there is a scientific uncertainty about treatment effects and that more studies or systematic reviews are needed to provide a reliable measurement.

## **Aim**

The aim of this Evidence Map is to identify relevant scientific evidence and evidence gaps in the area of functioning and disability by systematically assessing and categorizing all systematic reviews that evaluate the effect of interventions and methods relevant for the area.

## **Method**

### **Inclusion criteria**

#### **PICOs**

##### **Population**

- People of all ages with mental, neuropsychiatric, intellectual, sensory, and physical disabilities as well as dyslexia, dyscalculia and language impairment and multi-functional impairment.
- Next of kin or other close relatives of persons with disabilities.
- Professionals in the disability area.

##### **Intervention**

Interventions and methods that, in Sweden, could be implemented by the social service (eg personal assistance, home service, daily activities) and other municipal administrations (which handles, for example, housing adaptation), and government interventions such as assistance payments, car support and special support staff for introduction – and follow-up support (e. g Supported employment).

##### **Control**

No limitations have been made regarding comparative interventions. For example, a comparison may be no interventions or another equivalent intervention.

##### **Outcome**

- Reliability/validity
- Utility
- Equality in living conditions
- Participation in community life
- Activity/Activity limitation
- Quality of life
- Satisfaction
- Health
- Independence
- Empowerment
- Behavior
- Psychosocial outcomes (stress, anxiety, depression)
- Preventing/Combating discrimination
- Justice
- Side effects, unwanted events, problems, difficulties or events in connection with method or intervention
- Experiences of interventions or methods
- Next of kin or other close relatives' welfare and health
- The parental/supportive capacity of the next of kin or other close relatives'.

## Study design

Systematic reviews.

## Language

English, Swedish, Danish, Norwegian.

## Search period

From 2000 to 2017. Final search June 2017.

## Databases searched

Academic Search Elite, ERIC, PsycInfo, SocIndex (via EBSCO), Medline (OVID), Cochrane Library (Wiley), Applied Social Sciences Index and Abstracts (ASSIA), Sociological Abstracts/Social Services Abstracts, International Bibliography of Social Sciences (IBSS) (via Proquest), Scopus (via Elsevier) och Social Care online.

## Client/patient involvement

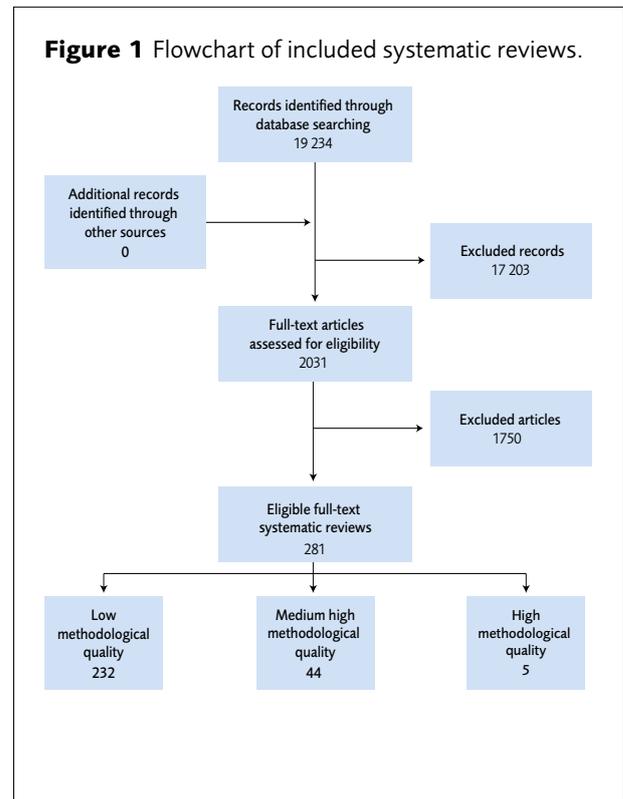
Yes

The PICO for this map, as well as the domains, were outlined by the project group. In order to make sure that a relevant map was drafted, representatives from the relevant field and patient organisations/patients were given the opportunity to review the draft. After considering their comments, the draft was finalized.

A systematic literature search was thereafter designed and performed by an information specialist in order to identify all published systematic reviews potentially relevant for the PICO. After the literature search was performed, two reviewers independently screened the abstracts and full text and selected the relevant systematic reviews. The risk of bias in the included systematic reviews were assessed independently by two reviewers using a modified version of the AMSTAR tool. Any disagreement regarding relevance or risk of bias was solved by a discussion.

Depending on the research questions addressed in the identified systematic reviews, they were classified according to the prespecified domains and are presented in the Evidence Map.

**Figure 1** Flowchart of included systematic reviews.



## Results

The literature search resulted in 19 234 articles. In the first stage, these articles abstract were reviewed and 2 031 of them were considered as relevant. After full text review, 1 750 articles out of 2 031 were considered to be irrelevant. 281 relevant systematic reviews were identified and provide the basis for this SBU Evidence Map. Out of the 281 systematic reviews meeting the inclusion criteria, 49 were judged to have a medium high or high methodological quality. All systematic reviews are presented in the Evidence Map.

## Conflicts of Interest

In accordance with SBU's requirements, the experts and scientific reviewers participating in this project have submitted statements about conflicts of interest. These documents are available at SBU's secretariat. SBU has determined that the conditions described in the submissions are compatible with SBU's requirements for objectivity and impartiality

## Appendices ([www.sbu.se/305e](http://www.sbu.se/305e))

- Reference list of included studies
- Excluded studies
- Search strategies
- Tools for risk of bias assessment

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