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Web Appendix 1: Results of study screening and selection process, 1980-2014

Stage 1: Peer reviewed literature: electronic database search (N=49376)

Stage 2a: Peer reviewed literature: title/abstract review (N=37500)

Stage 2b: Peer reviewed literature: full article review (N=384)

Stage 3: Grey literature papers added (N=39)

Stage 4: Peer reviewed and grey literature (N=423)

Stage 5: final papers selected (N=345)

Excluded: duplicates (N=11876)

Excluded after full paper review (N=78)

Excluded: no outcome or output, not an intervention, not a humanitarian crisis, others (N=37116)
Web Appendix 2: Quality review criteria (adapted from STROBE and CONSORT)

<table>
<thead>
<tr>
<th>STROBE Criteria for Observational Studies</th>
<th>CONSORT Criteria for Clinical Trials</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Intervention:</strong></td>
<td></td>
</tr>
<tr>
<td>1. Is the intervention clearly described?</td>
<td></td>
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<tr>
<td><strong>Selection of participants:</strong></td>
<td></td>
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<tr>
<td>2. Is the target population defined?</td>
<td></td>
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<tr>
<td>3. Is there a comparison group (e.g. baseline, control)?</td>
<td></td>
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<tr>
<td>4. Are the inclusion and exclusion criteria defined?</td>
<td></td>
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<tr>
<td><strong>Statistical methods:</strong></td>
<td></td>
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<tr>
<td>5. Is the sample size / method justified with statistical basis?</td>
<td></td>
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<tr>
<td>6. Is there a statistical test (p-value or confidence interval)?</td>
<td></td>
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<tr>
<td>7. Is there adjustment for confounding?</td>
<td></td>
</tr>
<tr>
<td><strong>Limitations:</strong></td>
<td></td>
</tr>
<tr>
<td>8. Are study limitations explained (e.g. biases)?</td>
<td></td>
</tr>
<tr>
<td><strong>Eligibility</strong></td>
<td></td>
</tr>
<tr>
<td>1. Did study state # not meeting inclusion criteria?</td>
<td></td>
</tr>
<tr>
<td>2. Did study state # declined to participate?</td>
<td></td>
</tr>
<tr>
<td><strong>Once Randomized:</strong></td>
<td></td>
</tr>
<tr>
<td>3. Did study state # receiving intervention?</td>
<td></td>
</tr>
<tr>
<td>4. Did study state # not receiving intervention?</td>
<td></td>
</tr>
<tr>
<td><strong>Allocation:</strong></td>
<td></td>
</tr>
<tr>
<td>5. Did study state # lost to follow-up?</td>
<td></td>
</tr>
<tr>
<td>6. Did study provide reasons for loss to follow-up?</td>
<td></td>
</tr>
<tr>
<td><strong>Analysis:</strong></td>
<td></td>
</tr>
<tr>
<td>• Did study state reasons participants were excluded from analysis?</td>
<td></td>
</tr>
<tr>
<td>• Are limitations of the study explained (e.g. biases)</td>
<td></td>
</tr>
</tbody>
</table>
Web Appendix 3: List of studies included in the study, by health topic

**Communicable disease control (by disease type)**

**Malaria**


Polio


Communicable Diseases (Excluding Malaria, NTDs, and Polio)


87. Arumugam, M., et al., Measles transmission following the tsunami in a population with a high one-dose vaccination coverage, Tamil Nadu, India 2004-2005. BMC Infectious Diseases, 2006. 6(143).


Water and sanitation

Nutrition


**Mental Health and Psychosocial Support**


**Non communicable diseases**


300. Amirjamshidi A, et al. (2003), Minimal debridement or simple wound closure as the only surgical treatment in war victims with low-velocity penetrating head injuries. Indications and management protocol based upon more than 8 years follow-up of 99 cases from Iran-Iraq conflict. Surgical Neurology. Vol. 60(2): 105-10; discussion 110-1.


