Appendix E: The synthesis volume gap - Health vs. Education

Health and education are two of the largest items of government expenditure. It has been estimated that annual education expenditure is US\$ 4.7 trillion⁸⁷ worldwide, while annual health expenditure is US\$ 8.3 trillion⁸⁸.

With such vast sums of money at stake, it surely makes sense to use a small proportion of this budget on systematic reviews to ensure that spending can be focused on practices that are proven to be effective.

There is a lack of comparative budget data on synthesis spending (input) in either sector. So, instead, we looked at the numbers of new systematic reviews published (outputs) to create a sense of the comparative rate of research synthesis between the two sectors. Of nearly 1,000 reviews we analysed, 86% were health/nutrition related, while just 3.3% were education focused. This snapshot suggests that while having 1.75 times the budget of education, the health sector produces 26 times more systematic reviews to help guide its spending and practice more effectively.

If we extrapolated these findings over 12 months, this suggests that the health sector produces in excess of 22,000 systematic reviews per year, compared to 860 in education.

Methodological note

- We used Google Scholar to identify the most recent journal articles containing "systematic review" in their title, as on July 18th, 2021, irrespective of sector. This identified 986 reviews covering a 14 day period. The sample was determined by a constraint of Google Scholar which will not return more than 1,000 results.
- We categorised each article according to its main thematic focus (e.g. health, education, business/social, IT, environment, etc.).
- We excluded 10 articles where the article was not itself a systematic review or systematic review protocol (e.g. a critique of methodology in an existing systematic review).
- Limitations: this is a time specific snapshot based on new reviews containing "systematic review" in their title as catalogued by Google Scholar. It is likely that other systematic reviews exist that are not captured by this approach. We judged and recorded the primary thematic focus only, whereas some articles spanned sectors (e.g. school based interventions for preventing smoking). Another limitation is that this captures systematic reviews of any kind (intervention reviews and thematic reviews).