

That's a claim!

Key Concepts for thinking critically about social welfare claims



BEWARE
Too good to be true
"100% safe!"
People often think about the benefits of interventions and ignore possible harms. But few interventions that work are 100% safe.

BEWARE
Too good to be true
"100% effective!"
Most claims that an intervention will make you 100% better or that it works for everyone turn out to be wrong.

BEWARE
Too good to be true
"100% certain!"
We can rarely, if ever, be 100% certain about the effects of interventions.

BEWARE
Faulty logic
"Associated with!"
Just because using an intervention is associated with people getting better or worse, that doesn't mean that the intervention made them better or worse.

BEWARE
Faulty logic
"Treatment needed!"
Interventions are not always necessary: people can improve their situation or resolve their problem without an intervention. Sometimes a treatment will not help and may even make things worse.

BEWARE
Faulty logic
"It works like this!"
Interventions that should work in theory often do not work in practice.

BEWARE
Faulty logic
"A study shows!"
If a single study shows that people who got one intervention did better or worse than people who got something else, it does not mean that is the final answer.

THINK FAIR
Unfair comparison
Dissimilar comparison groups
Look out for treatment comparisons where the comparison groups were not alike.

THINK FAIR
Unfair comparison
Indirect comparisons
Look out for comparisons of interventions between studies that are different.

THINK FAIR
Unfair comparison
Dissimilar care
Look out for intervention comparisons where the comparison groups were cared for differently.

THINK FAIR
Unfair comparison
Dissimilar expectations
Look out for treatment comparisons where people knew which intervention they received and knowing that could have changed how they felt or behaved.

THINK FAIR
Unfair comparison
Dissimilar measurement
Look out for comparisons where what happened was measured differently in the comparison groups.

THINK FAIR
Unfair comparison
Lots of missing people
Look out for comparisons where what happened was not measured in lots of people or where people dropped out of the study.

TAKE CARE
Relevant evidence
Are the people (or animals) very different?
Always ask yourself if the treatment comparisons included only people (or animals) that are very different from you.

TAKE CARE
Relevant evidence
Are the circumstances different from yours?
Always ask yourself if fair comparisons of interventions were conducted in circumstances that are relevant.

BEWARE
Faulty logic
"Lots of data!"
More data is not necessarily better data, whatever the source.

BEWARE
Faulty logic
"No comparison needed!"
Unless an intervention is compared to something else, it is not possible to know what would happen without it.

BEWARE
Faulty logic
"More is better!"
Taking more of a treatment may increase harms and/or costs without increasing how much it helps.

THINK FAIR
Unreliable summary
Unsystematic summary
Look out for summaries of studies comparing interventions that were not done systematically.

THINK FAIR
Unreliable summary
Selective reporting
Look out for unpublished results of fair comparisons.

THINK FAIR
Unreliable summary
Unfounded assumptions
Look out for treatment comparisons that are sensitive to assumptions that are made.

THINK FAIR
Misleading description
Just words
Look out for treatment effects that are described just using words.

THINK FAIR
Misleading description
Average effects
Look out for treatment effects that are described as average differences.

THINK FAIR
Misleading description
Few people or events
Look out for treatment effects that are based on small studies with few people.

THINK FAIR
Unfair comparison
Unreliable assessment of outcomes
Look out for outcomes that were not assessed reliably in intervention comparisons.

TAKE CARE
Advantages and disadvantages
How sure are you?
Always ask yourself how sure you are that the possible advantages of an intervention are better than and the possible disadvantages.

BEWARE
Faulty logic
"Old is better!"
Just because something has been used for a long time or by many people, it does not mean that it helps or that it is safe.

BEWARE
Faulty logic
"New is better!"
Just because an intervention is new, expensive, technologically impressive, or brand-named does not mean that it is better or safer than other interventions.

BEWARE
Trust alone
"As advertised!"
Someone with an interest in getting people to use an intervention or adopt a program, such as making money, may overstate benefits and ignore possible harmful effects.

THINK FAIR
Misleading description
Subgroup analyses
Look out for results that are reported for a selected group of people within a study or systematic review.

THINK FAIR
Misleading description
No confidence interval
Look out for results that are reported using p-values instead of confidence intervals.

BEWARE of claims that have an untrustworthy basis

Many claims about the effects of treatments are not trustworthy. Often this is because the reason (the basis) for the claim is not trustworthy.

You should be careful when you hear claims that are:

- Too good to be true
- Based on faulty logic
- Based on trust alone

BEWARE
Trust alone
"It worked for me!"
If someone got better after receiving an intervention does not necessarily mean that the intervention made them better.

BEWARE
Trust alone
"Recommended by experts!"
Just because an intervention claim is made by an expert or authority does not mean that it is trustworthy.

BEWARE
Trust alone
"Peer reviewed!"
"Peer-reviewed" and published studies may not be fair comparisons.

THINK FAIR
Misleading description
Statistically significant
Look out for results that are reported as "statistically significant" or "not statistically significant".

THINK FAIR
Misleading description
No evidence
Look out for a "lack of evidence" being described as evidence of "no difference".

THINK FAIR - and check the evidence from treatment comparisons

Evidence from comparisons of treatments can fool you. You should think carefully about the evidence that is used to support claims about the effects of treatments.

Look out for:

- Unfair comparisons of treatments
- Uncareful summaries of comparisons
- How treatment effects are described

TAKE CARE - and make good choices

Good treatment choices depend on thinking carefully about what to do.

Think carefully about:

- What your problem is and what your options are
- Whether the evidence is relevant to your problem and options
- Whether the advantages outweigh the disadvantages

Introduction

Should I take medication or exercise to improve my mood? Should we teach abstinence or provide free condoms to prevent teenage pregnancy? There are lots of claims about what you should do to prevent and treat numerous psycho-social and social problems. How can you know which of these claims are trustworthy? And how should you decide when to act on claims about prevention and treatment options?

A **social welfare intervention** can include something an individual would do to prevent or treat a mental or behavioral health problem, such as treatment for anxiety or substance abuse, to population-based interventions aimed at improving social conditions, such as ending homelessness or poverty.

How can we tell which **claims** are right or wrong? To do this, you need to look at what supports the claim – its **basis**. For example, someone's personal experience is not a good basis for making or believing claims about interventions. Just because your friend found meditation helpful to reduce their anxiety doesn't mean meditation is effective for treating anxiety. This is because we don't know what would have happened if that person had done something else.

To know if a treatment (providing free contraception) causes an **effect** (like reducing teenage pregnancy), the treatment has to be **compared** to something else (like abstinence only education). Researchers compare a treatment given to people in one group with something else given to people in another group. Those comparisons provide **evidence** – facts to support a conclusion about whether a claim is right or wrong. For those comparisons to be **fair**, the only important difference between the groups should be the treatments they receive.

A **good choice** is one that uses the best information available at the time. For health choices, this includes using the best available evidence of treatment effects. Good choices don't guarantee good outcomes, but they make good outcomes more likely.

www.thatsaclaim.org/socialwelfare/