## Table B

* Religion • People experiencing homelessness
* Social hierarchy (caste, tribes) • Drug or alcohol dependence
* Place of residence • Language minority groups
* Wealth / economic capital • Vulnerable migrants, or internally displaced people

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ***Signalling question*** | ***Response options*** | ***Equity-related dimension(s) / participant characteristic(s)*** | | | | | | | |
| *Religion* | *Social hierarchy (caste, tribes)* | *Place of residence* | *Wealth / economic capital* | *People experiencing homelessness* | *Drug or alcohol dependence* | *Language minority groups* | *Vulnerable migrants, or internally displaced people* |
| 1a. Is the intervention under investigation targeted at specific marginalised, at-risk, socially excluded and/or inclusion health group(s) of people? (e.g.  interventions for  reducing social isolation and loneliness among older adults) [1] | *Yes* |  |  |  |  |  |  |  |  |
| *No* |  |  |  |  |  |  |  |  |
|  | *N/A* |  | | | | | | | |
| 1b. Is the intervention under investigation aimed at reducing social gradients across populations or among subgroups of the population? (e.g. interventions to reduce the SES gradient in smoking) [1] | *Yes* |  |  |  |  |  |  |  |  |
| *No* |  |  |  |  |  |  |  |  |
|  | *N/A* |  | | | | | | | |
| 2a. Is the health condition, or public health issue, being addressed by the review (and/or map) more likely to be experienced by one or more specific marginalised, socially excluded and/or inclusion health group(s) of people? [4] | *Yes* |  |  |  |  |  |  |  |  |
| *No* |  |  |  |  |  |  |  |  |
| *Unsure* |  |  |  |  |  |  |  |  |
|  | *N/A* |  | | | | | | | |
| 2b. Are aspects of the intervention(s) and/or comparator(s), including how they are provided, expected to make it harder for some specific marginalised, at-risk, socially excluded and/or inclusion health group(s) of people to take part in eligible studies? [4] | *Yes* |  |  |  |  |  |  |  |  |
| *No* |  |  |  |  |  |  |  |  |
| *Unsure* |  |  |  |  |  |  |  |  |
|  | *N/A* |  | | | | | | | |
| 2c. Are elements of the design of eligible studies, such as their eligibility criteria, or their recruitment and/or consent processes, expected to make it harder for some specific marginalised, at-risk, socially excluded and/or inclusion health group(s) of people to take part in eligible studies? [4] | *Yes* |  |  |  |  |  |  |  |  |
| *No* |  |  |  |  |  |  |  |  |
| *Unsure* |  |  |  |  |  |  |  |  |
| 3. Are the impacts of, or responses to, the intervention(s), or the experiences of the phenomenon, under investigation, expected to differ among specific marginalised, at-risk, socially excluded and/or inclusion health group(s) of people *in important or meaningful ways*? [5] | *Confident that effects differ* |  |  |  |  |  |  |  |  |
| *Confident that effects do not differ* |  |  |  |  |  |  |  |  |
| *Unsure whether effects differ* |  |  |  |  |  |  |  |  |
| *N/A* |  | | | | | | | |