Social norms interventions to change clinical behaviour in health workers: a systematic review and meta-analysis

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Plain English summary

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t is important to encourage health workers to perform clinical behaviours appropriately for efficient use of health service resources and improved patient health outcomes. Sometimes health workers do not follow recommended practice, for example when blood tests are not ordered when required or when the wrong medication is prescribed. Social norms interventions are approaches that are used by health services with the aim of changing the future clinical behaviour of health workers; this approach works by exposing a health worker to the beliefs, thoughts, opinions or behaviours of their peers. For example, an e-mail sent to a doctor stating how often their colleagues prescribe antibiotics compared with their own number of prescriptions is an example of the behaviour change technique social comparison. A communication from a well-respected person in support of the behaviour is an example of credible source. This study aimed to summarise all of the evidence on using social norms interventions to change the clinical behaviours of health workers.

The researchers found 106 relevant studies. Most of the studies focused on doctors, although other health workers were also involved. Commonly targeted behaviours were the prescribing of medicines, ordering of tests and managing of health conditions. Social norms interventions can have a moderate effect on the clinical behaviour of health workers and can also improve patient health outcomes, but the magnitude of the effect varies greatly between studies. Both social comparison and credible source were found to be effective ways of changing clinical behaviours of health workers and improving patient health outcomes. The effectiveness of social comparison could be boosted when combined with a prompt, such as a computer pop-up that gives a reminder about antibiotic prescribing guidelines when a general practitioner tries to prescribe antibiotics.

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