of studies, further risk or economic evaluation, clinical ethics consultation, an expert panel evaluation, or other (depending on local circumstances).

**Discussion** EsDA provides a systematic process for increasing awareness about principles for quality management and priority setting among clinical leaders, in order to develop safe, effective, efficient and patient-centered services. A database of completed EsDa forms facilitates comparison and harmonization of decisions and research, and documents how the hospital sets priorities to improve the quality and outcome of care.

Further work includes a pilot project among clinical leaders, establishment of criteria for when they should use EsDA, evaluation of the digital platform and database, and implementation research.

**Abstracts**

**EFFECTIVENESS OF PRIORITY SETTING IN HEALTH CARE**

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10.1136/bmjgh-2022-ISPH.38

**Introduction** In the past decades, several aspects of priority setting in health care have been addressed, but relatively little attention has been given to the question of its effectiveness. There may be several reasons for this, including the significant methodological challenges associated with such endeavor. However, raising the effectiveness issue could still be worthwhile. It could engender a debate as to what, exactly, is or is to be pursued by priority setting in health care, and it might increase our understanding of underlying mechanisms or pre-conditions for priority setting to work well.

**Methods** A review of policy analyses of the effectiveness of priority setting at the national level in the Dutch health care system.

**Results** As part of a wider evaluation, a recent study has shown that so far, governmental influence on the composition of the benefit package has been small. In addition, the National Accounting Office has shown that explicit priority setting has had only minor impact on the financial sustainability of the health care system. Finally, the Scientific Council for Government Policy has shown that the way resources are being spent results only to a small degree from explicit policy decisions. It argues that quality and accessibility of certain health care sectors (e.g., mental health, youth care) are insufficient, calling for more forceful explicit priority setting.

**Conclusions** Research into the effects of priority setting at the national level in the Dutch health care system.

The burden of the pandemic is more pronounced among vulnerable and marginalized groups in the society, who, in the context of complex disadvantages, do not have the means to cope with the multifaceted disruptions in the labour market, food and health system, and their social networks. The pandemic and different measures taken by the Ethiopian government including State of Emergency (SOE) and strategies to contain COVID-19 affect all citizens in general and LGB in particular.

This mixed methods study seeks to assess the impact of COVID-19 and the wide socio-economic and political upheaval associated with the State of Emergency Proclamation on the lives of LGBs in Ethiopia. The research combines phone surveys involving 200 LGB and qualitative interviews with 12 LGB.

Most of the participants reported experiencing drastic changes in their lives since the advent of COVID-19. The most reported as well as the worst experiences include unemployment/reduced income and food/housing insecurity; fear of COVID-19 infection or death; inability to continue normal daily life, social and intimate relationship; and change in living arrangement. A small proportion of participants also mentioned violence. The study confirmed the precarious situation of sexual minorities in times of crisis. The ongoing war since Nov.2020 and resulting insecurity have led to disruption and destruction of the economy, social and health services; and deterioration of peace and security with significant bearing on marginalized groups.

Long standing and entrenched stigma and widely held notions of heteronormativity have relegated LGB in Ethiopia to the margins of society. The pandemic and subsequent SOE and internet interruptions have pushed LGB into further physical, social, and economic vulnerabilities and marginalization. Within the LGB group, the impact varies across individuals based on their socioeconomic and health standing. The situation calls for concerted policy measures to address economic, social, and health determinants.

**LIVING SYSTEMATIC REVIEWS (LSR) AND PROSPECTIVE META ANALYSIS (PMA): A CALL-OF-DUTY FOR BAYESIAN ANALYSIS**

110.1136/bmjgh-2022-ISPH.40

**Background** The recent Covid-19 pandemic has accelerated the use of LSRs and PMAs, viewed as the ‘next generation systematic reviews and meta-analyses’. LSRs and PMAs are prospective designs that can reduce the problems of traditional retrospective meta-analyses (MA) such as selective outcome reporting and publication bias, missing data, etc., and thus offer a better option for incorporating and generating new evidence.

**Objectives** We propose the Bayesian approach as a method for analysing LSRs and PMAs. Bayesian Meta Analysis (BMA) is particularly appealing - actually, natural - for these designs as it clearly reflects the process of learning, defined as new evidence coming to update the previous knowledge, that is intrinsic to LSRs and PMAs.