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**#A SYSTEMATIC REVIEW AND THEORY SYNTHESIS FOR THE IMPACT OF FOREIGN AID ON HIV/AIDS IN SUB-SAHARAN AFRICA**

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**Background** Despite billions of dollars invested in the global HIV/AIDS response, the disease remains an epidemic throughout much of Sub-Saharan Africa. However, no literature has comprehensively or systematically explored the causal mechanisms between input of foreign aid and changes in HIV/AIDS outcomes. Understanding these pathways remains vital for improving the effectiveness of foreign aid programmes. This review advances this knowledge by investigating: *How does foreign aid impact on HIV/AIDS outcomes in Sub-Saharan Africa?* It aimed to construct a meta-theoretical framework, which facilitated identifying gaps in the evidence-base.

**Methods** A systematic review was conducted following PRISMA guidelines on 17 databases and 24 grey literature sources. The search strategy combined terms for foreign aid, implementation, evaluation, theory, and HIV/AIDS. Included studies had to be published after 1997 and contain theory-based and process-level discussions of how foreign aid impacts on HIV/AIDS in Sub-Saharan Africa. Studies were appraised for risk of bias in study design and theoretical rigour; high-quality studies were used to construct the initial framework and remaining studies were considered case-by-case for potential contributions to a generalisable framework. Theory synthesis was conducted using thematic analysis in order to map the pathways between aid input and changes in HIV/AIDS outcomes.

**Results** Of the 2423 unique articles identified, 45 records were screened at full-text for eligibility. From the 15 included studies, four themes emerged. First, there exists a clear, linear causal pathway between aid input and improved treatment coverage; however, there remain weak theoretical linkages connecting foreign aid to other HIV/AIDS outcomes. Second, no evaluation fully-captures the influence of the physical environment or the multitude of factors in the social environment acting as structural determinants of HIV/AIDS outcomes. Third, the determinants of aid allocation limit the generalisability of the framework to countries that have a baseline government capacity to address the epidemic. Fourth, there remains no evidence-base in the conceptual understanding of foreign aid's impact on HIV/AIDS outcomes in vulnerable populations, including sex workers, the LGBTQ+ community, and children.

**Conclusion** The synthesis demonstrated that there is a complex pathway from foreign aid input to changes in HIV/AIDS outcomes. It also highlighted the breadth and diversity of pathways through which aid may impact on core and intermediary outcomes. Due to limited empirical analysis evaluating the system-level complexities of the topic, the framework remains reliant on a sparse evidence-base. The framework provides a starting point for considering where resources should be directed to explore under-researched areas.

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**RESPONSIBLE JOURNALISM, IMITATIVE SUICIDE AND TRANSGENDER POPULATIONS: A SYSTEMATIC REVIEW OF UK NEWSPAPERS**

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**Background** Imitative ('copycat') suicide occurs when a media representation of suicide precipitates a suicide attempt. Several organisations have guidelines for responsible suicide reporting, designed to minimise risk of precipitating imitative suicide. Observational studies have explored the evidence for imitative suicide, showing that a large amount of suicide coverage in the news is followed by higher incidence of deaths from suicide. Those imitating a suicide tend to share characteristics such as gender and age with the person whose death was portrayed. The effect of sharing transgender status has not yet been explored. Suicide attempts are common in the transgender population: 40% have attempted suicide at least once. This systematic review will evaluate to what extent UK newspapers adhere to guidelines when reporting suicides of transgender people.

**Methods** We searched the newspaper database Nexis for UK newspaper articles published September 2007–2017 which reported the suicide of a transgender person. One reviewer screened results and applied inclusion and exclusion criteria. A checklist tool of ten criteria was adapted from the suicide reporting guidelines of three organisations. Two reviewers independently applied the checklist to each article, noting any breaches. Disagreements were resolved by discussion. A measure of inter-rater reliability was calculated. Analyses were conducted in SPSS.

**Results** The search found 996 articles, 187 of which were screened in full. The 79 articles which met inclusion criteria concerned 22 individuals' deaths, and came from 19 newspapers.

Every article had  $\geq 1$  checklist breach, with a mean of 3.9/10 breaches (95% CIs 3.5 to 4.3). The majority of articles (63.3%) had 3–5/10 breaches. Percentage prevalence of breaches varied between checklist items, with the most commonly breached features being inappropriate headlines, failure to signpost readers to sources of support, and inappropriate descriptions of death/suicide method.

The measure of overall inter-rater reliability showed nearly perfect agreement between reviewers (Cohen's kappa=0.86).

**Discussion** Breaching responsible reporting guidelines is very common in UK newspapers when covering suicide deaths of transgender people, although a key limitation is that results cannot be extrapolated to internet news sources or social media.

Because breaching guidelines has the potential to cause harm—perhaps more so in transgender than cisgender individuals—journalists should be aware of imitative suicide and try to minimise risk of harm. Although sometimes breaching guidelines may be justified, the priorities of public health and of journalism should be weighed against each other.