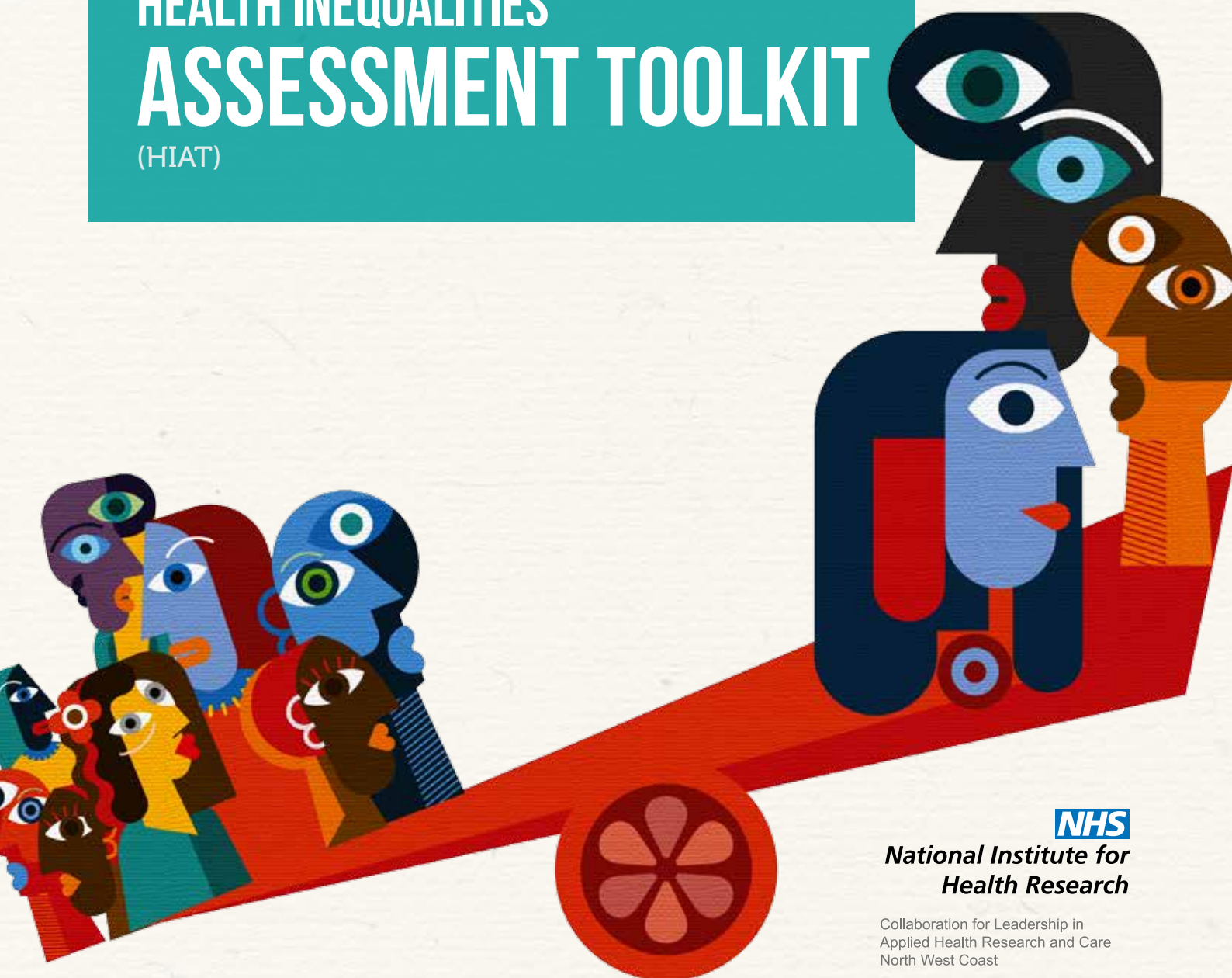


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National Institute of Health Research
Collaboration for Leadership in Applied
Health Research and Care North West Coast

HEALTH INEQUALITIES ASSESSMENT TOOLKIT

(HIAT)



NHS
**National Institute for
Health Research**

Collaboration for Leadership in
Applied Health Research and Care
North West Coast

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**HIAT HAS BEEN DEVELOPED
TO MAKE SURE THAT ALL
CLAHRC NWC ACTIVITIES
HAVE THE POTENTIAL TO
CONTRIBUTE TO REDUCING
INEQUALITIES IN HEALTH.**

This toolkit includes questions that can help you to assess whether the work you want to carry out considers the causes of health inequalities and has the maximum possible effect on reducing these. Our staff and partners worked together to develop the toolkit in a series of workshops in 2014-2015.

WHY FOCUS ON HEALTH INEQUALITIES?

Due North, the report of an enquiry set up by Public Health England, documented in 2014 the scale of the health divide between the North and the rest of England. This regional divide masks inequalities in health between different socio-economic groups within every region in England. This is caused by an unbalanced combination of social and economic circumstances in the North, which limits the resources people have to pay for food and housing, and decides the wider environment in which people live and work. Also, it limits the control people have over their lives, helping to shape behaviour that can damage health. We call these conditions the socio-economic causes of health inequalities.

THE IMPLICATIONS FOR ACTION

Much of the responsibility for reducing health inequalities and their socio-economic causes lies with central government. However, a lot can be done locally, despite cuts in public spending. Actions include: targeting social factors that can affect health, such as poverty, economic inequalities and poor housing; preventing the onset of chronic illness; making sure people have prompt access to high-quality healthcare; creating social and physical environments that promote good health; and preventing the unequal consequences of ill-health.



SECTION 1:

CLARIFYING THE HEALTH-INEQUALITY ISSUES



Key questions

- 1.1 **What is the problem** you plan to address and **which groups** do you want to work with?
- 1.2 **What evidence is there** that this health problem is **unequally distributed across people** living in **different socio-economic** circumstances?
- 1.3 What particular socio-economic causes of health inequalities **would you expect to influence this problem?**

Making
sure the
public are
involved
in an
appropriate
way

- 1.4 Have you involved relevant members of the public (for example, service users or carers, particularly those experiencing socio-economic disadvantage, or people living in disadvantaged neighbourhoods) in helping to identify the problem you want to tackle?



SECTION 2:

DESIGNING YOUR WORK TO HAVE MAXIMUM EFFECT ON REDUCING HEALTH INEQUALITIES

Key questions

- 2.1 How do you plan to address the problem you want to focus on?
- 2.2 How will your **proposed work tackle some of the socio-economic causes of the health inequalities** you identified in section 1?
- 2.3 How could the socio-economic circumstances in which your target group live and work **limit their ability to benefit from, or take part in, your activities? Are there any risks** that your work may unintentionally increase inequalities in health? How would you **reduce these risks**?
- 2.4. What further partnerships (for example with local authority staff) might **increase the positive effect of your work**?

SECTION 3:

EVALUATING AND MONITORING THE EFFECT OF YOUR ACTIVITY ON HEALTH INEQUALITIES

Key questions

- 3.1 **Will your evaluation (or evidence review) provide evidence on:**
 - (a) unequal access to services to be developed or already provided (for example, whether some ethnic groups have poorer access than others)?
 - (b) differential health outcomes (whether the interventions you have evaluated or included in your review are less effective for some groups than for others)?
- 3.2 In addition to socio-economic status **what key social variables will you use to assess the differential effect of your work on health inequalities?** (gender, age, disability, ethnicity, place of residence, occupation, etc)
- 3.3 **Will you be able to identify any possible unintended effects (positive and negative) of your activity,** particularly on health inequalities and their socio-economic causes? If so, which methods and routine data will you use to capture this information?

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- socio-economic causes of health inequalities** among service providers, commissioners, researchers and members of the public involved in your proposed work?
- 4.2 Will the results be used to enhance health inequalities sensitivity** in future planning of interventions, programs, activities, research, etc?
- 4.3 Have you thought about the most effective way you can share what you have learned from your work within the wider social and healthcare communities?**

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THE HIAT

The toolkit aims to be relevant to applied research, evidence synthesis, capacity building, knowledge exchange, implementation and evaluation. Finding a language that applies across all of these activities is difficult. Yet, the issues we are dealing with are relevant to all of our work. The toolkit has four sections but you do not need to follow them in order. Finally, the HIAT includes questions to make sure you involve appropriate members of the public in all stages of your work.

CONTACT

This card is an abridged version of the full toolkit that can be accessed online to find resources such as readings, films, activities and case studies providing more information and examples.

Contact:

a.porroche-escudero@lancaster.ac.uk
j.popay@lancaster.ac.uk

More information:

www.hiat.org.uk

NHS
**National Institute for
Health Research**

Collaboration for Leadership in
Applied Health Research and Care
North West Coast

**Lancaster
University**



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