

Health Inequalities Impact Assessment

Working collaboratively to develop a strategic framework

Synopsis

Our innovative project develops, tests and disseminates a suite of analytical methods to determine the impact of health policy, planning or service decisions on reducing or increasing health inequalities. Our project brings together a collaboration of multi-disciplinary investigators, recognised world experts, and key senior health managers working in national, state, local and institutional settings both in Australia and internationally.

We aim to develop the tools to equip health sector decision-makers to conduct “equity audits” of existing programs and prospective health inequality impact assessments (HIIA) of policy, program and service outputs. A major outcome will be the enhanced capacity of managers to make valid judgements about whether and how their decisions impact upon the gaps in health status between and within groups in the local community, and the broader population.

The first step is to develop the framework for HIIA in consultation with key stakeholders in Australia, the United Kingdom, Canada and New Zealand, and by drawing on pertinent aspects of the literature concerning health impact assessment, health inequalities modelling and policy analysis. The second step involves testing the HIIA framework in five case studies comprising different service delivery settings. The final step involves appropriately framing, refining and disseminating training resources and practical guides to using the methods we develop, so that current and future managers, at all levels and in any sector, might incorporate HIIA into their routine decision-making processes. Given that a number of non-health policies have health inequality impacts, there is value in conducting HIIA in sectors other than health. Accordingly our project will make recommendations for the application of HIIA in non-health sectors.

Aims

The aims of our Health Inequalities Impact Assessment project are to:

- develop an HIIA framework for assessing and measuring the impact of policy decisions on health inequalities in Australia;
- demonstrate the application of this HIIA framework using five case studies in a spectrum of settings across Australia and New Zealand;
- use feedback from these case studies to improve and refine the HIIA framework;
- produce training and educational resources to meet public health workforce education and training needs and build capacity within this workforce and
- make recommendations regarding the future application of HIIA in Australia in both the health and non health sectors.

Strategic Importance

This project has major strategic significance not only because it addresses the need for a viable and relevant framework of methods and tools which can be used to undertake HIIA in Australia, but because it will facilitate a collaboration of national and international experts who will help drive HIIA change processes within the public health workforce.

Our project will:

- be shaped by international experts and national stakeholders;
- be led by a collaboration of investigators with skills and expertise in public health medicine and policy, health impact assessment, health inequalities research, health workforce education, social and clinical service delivery in disadvantaged communities and health economics;
- equip decision-makers to make routine prospective assessments and conduct “equity audits” of the impact of their decisions on health inequalities and
- add value to current public health workforce training programs by enhancing public health workers’ skills and capacity to develop a “whole of government” approach to reducing health inequalities.

Project Partners

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CASE STUDY PRINCIPALS

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INTERNATIONAL REFERENCE GROUP

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Three Phases

Phase 1

Phase 1 focuses on macro level screening and scoping, the profiling of existing data collections, the investigation of methods of data collection and exploration of the capabilities of linked data sets as well as case study planning which will involve close liaison with the key managers in each setting. The Phase 1 outcomes include an HIIA framework encompassing a suite of methods and tools for application in the Phase 2 case studies. The framework aims to be responsive, flexible and adaptable, drawing on the qualitative and quantitative methods of inquiry used in public health, health policy and planning, health economics, epidemiology, biostatistics and sociology.

Phase 2

Phase 2 involves micro level screening, scoping and data profiling within five case studies in order to identify, assess and measure both the intended and unintended impacts of policies, plans and decisions on health outcomes and health inequalities. Each case study aims to test, modify and refine the utility of the HIIA framework in the “real world”. Phase 2 focuses on stakeholder and consumer consultation and workforce capacity building through the application of the HIIA framework. The case study processes and outcomes vary across the settings. They may, for example, be used to refine a policy or plan or establish mechanisms for monitoring a policy or service implementation.

Phase 3

The dissemination of the HIIA framework in Phase 3 has two main strategic elements; firstly strategies for informing and training the public health workforce, and secondly strategies to ensure the product is framed and marketed successfully. Phase 3 outcomes include the dissemination of our HIIA methodology, an increased ability of managers at many levels and across many sectors to undertake HIIA as part of their routine decision-making, and at least some evidence of an appreciation by senior decision-makers of the value of HIIA. The dissemination, framing and marketing processes are guided by members of the Project Steering Committee who have extensive policy and service decision-making experience, wide-ranging national and international networks of key contacts, and access to key stakeholders.

We welcome feedback at any time.

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