

Using the Health Inequalities Assessment Toolkit (HIAT) to focus research on equity and intersectionality

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Commit to change

Based on what you have learned so far, what is the one thing you plan on changing/do differently in order to embed/strengthen the equity and intersectional lens of your research?


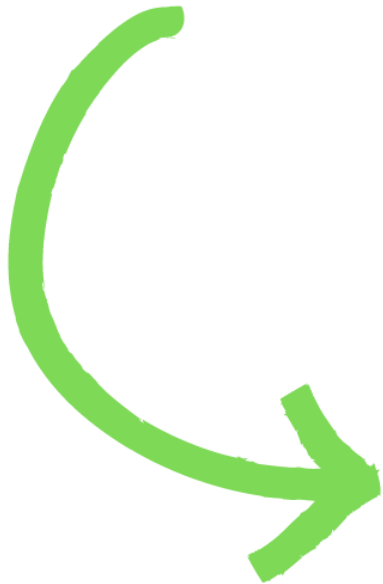


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FORE web-resource


<https://forequity.uk/>



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FOCUS ON RESEARCH AND EQUITY

Welcome to FOR Equity, providing tools and resources to help make research evidence more relevant for action to reduce social and health inequalities



WHAT ARE HEALTH INEQUALITIES?

Health inequalities are large, avoidable, and, therefore, unjust differences in the experience of health and illness. They are caused by systems of discrimination, powerlessness, and disadvantage that intersect across social class, gender, ethnicity, sexuality, age, and disability. Research that integrates an intersectional equity lens can help reduce these inequalities. There is a short video on the relationship between intersectionality and health [here](#).



Geography matters at different scales. On average, people living in the most disadvantaged neighbourhoods have 18 years fewer free of disability than those in the most advantaged neighbourhoods. But the average life expectancy of people in the most disadvantaged areas in the north of England is lower than it is amongst people in similarly disadvantaged areas in the south of England.

FOR EQUITY RESOURCES ARE DESIGNED TO HELP RESEARCHERS INTEGRATE AN INTERSECTIONAL EQUITY LENS INTO THEIR STUDIES



THE FOR EQUITY GUIDANCE INVENTORY



THE HEALTH INEQUALITIES ASSESSMENT TOOLKIT (HIAT)



THE FOR EQUITY RESOURCES LIBRARY


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Gendered innovations in Science, Health & Medicine, Engineering and Environment






Inclusion, Dignity, Equality, Accessibility and Intersectionality Decision Aid




Principles for research on ethnicity and health

Conceptual framework for monitoring equity in health and healthcare

Conceptual framework for advancing health disparities research within the health care system




Equity-integrated population health status reporting: Action framework




CONCEPTUAL FRAMEWORK FOR ADVANCING HEALTH DISPARITIES RESEARCH WITHIN THE HEALTH CARE SYSTEM

Kilbourne, A.M., Switzer, G., Hyman, K., Crowley-Matoka, M. and Fine, M.J., 2006. Advancing health disparities research within the health care system: a conceptual framework. *American journal of public health*, 96(12), pp.2113-2121.

SUMMARY

This framework aims to support a greater emphasis on health equity in health care research, by paying attention to multilevel determinants of health disparities at the individual, provider, and organisational level. It can help guide researchers' understanding of detecting, understanding, and reducing or eliminating health and health care disparities

AUDIENCE

Researchers, Policy Practice

USE IN RESEARCH PROCESS

Research general, Monitoring and evaluation, Health equity theorisation, Research questions

THEORETICAL FRAMEWORKS

Explicitly states that the focus of the framework is on addressing health disparities in health care system and is not a public health framework which focuses on causes of disparities within communities or society. However, the framework does acknowledge the importance of factors outside the health care system.

EVIDENCE OF PUBLIC INVOLVEMENT

Evidence not reported. The framework highlights the importance of community-researcher collaborations throughout the research process as critical for meeting the goal of reducing disparities.

EVIDENCE OF EVALUATION

Widely cited. The framework also includes examples to illustrate concepts, mechanisms and pathways relate to health disparities within the health care system.

FULL TEXT

<https://doi.org/10.2105/AJPH.2005.077628>

RESOURCES LIBRARY

Here you will find resources linked to the HIAT and general resources on research sensitive to inequalities.



The resources below are grouped into six sections:

- intersectionality and health;
- health equity and structural drivers;
- researching social categories;
- inclusive public involvement;
- equity-focused practice and policy; and,
- other relevant resources.

The short case studies included here are grouped according to four of the HIAT's five sections. They cover different types of studies and illustrate how researchers have tried to integrate an equity lens at different points in the research process. Where they are relevant to more than one HIAT section they are repeated.

1. MAPPING HEALTH INEQUALITIES RELEVANT TO YOUR RESEARCH

is the foundation for integrating an equity lens throughout your study

[Read more](#)

2. INTEGRATING AN INTERSECTIONAL EQUITY LENS INTO RESEARCH QUESTIONS

helps ensure health inequalities are central to study design

[Read more](#)

3. DESIGNING AND CONDUCTING RESEARCH SENSITIVE TO INEQUALITIES

requires attention to what data to use, how to obtain and analyse it, and how the findings are interpreted

[Read more](#)

4. PRIORITISING RESEARCH FINDINGS AND ACTIONABLE RECOMMENDATIONS FOR REPORTING AND DISSEMINATION

will maximize the impact of your research

[Read more](#)

INTERSECTIONALITY AND HEALTH EQUITY

INTERSECTIONALITY AND HEALTH EXPLAINED (VIDEO)

This video – created by a research team in the Department of Sociological Studies at the University of Sheffield in the UK – is part of a Social Research Council-funded project – considers 'intersectionality', a term coined by Kimberlé Crenshaw to describe the experience of black women, and how this can lead to differences in health.



THE PROBLEM WITH THE PHRASE WOMEN AND MINORITIES

[Bowleg, L., 2012. The problem with the phrase women and minorities: intersectionality—an important theoretical framework. *Journal of public health*, 102\(7\), pp.1267-1273.](#)

integrate an equity focus into their research.

[HIAT Resources](#)

developing research on health inequalities

[General Resources](#)

HEALTH EQUITY AND STRUCTURAL DRIVERS

WELCOME TO THE FOR EQUITY THERMOMETER AND SCREENING TOOL

The thermometer can be used on its own or in conjunction with the screening tool to support individual research studies or whole organisations identify current equity sensitivity, monitor progress, and/or communicate their equity journey.



THE FOR EQUITY THERMOMETER

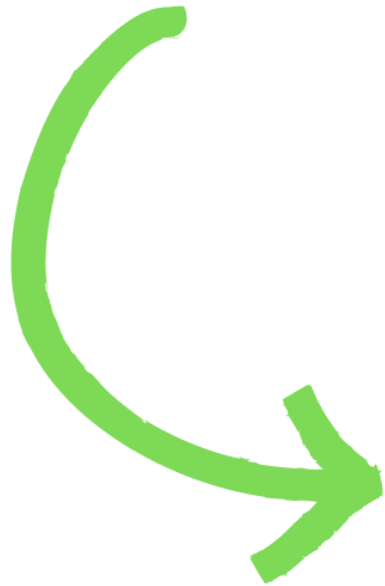
A pathway to equity displayed in the form of a thermometer that can be used by individual research studies or organisations. Access a PDF copy of the FOR Equity Thermometer.



THE FOR EQUITY SCREENING TOOL

An interactive tool that can be used to identify a study's or an organization's current 'equity temperature' according to the FOR Equity Thermometer

HIAT Tool



FOR EQUITY

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WELCOME TO THE HEALTH INEQUALITIES ASSESSMENT TOOLKIT

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The HIAT aims to support people to integrate an intersectional equity lens into research, and consider how people with lived experience and policy or practice expertise can help in this process.

THE HEALTH INEQUALITIES ASSESSMENT TOOL HAS FIVE SECTIONS - YOU CAN WORK THROUGH THESE IN WHICHEVER ORDER YOU WANT

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- 1. Mapping health inequalities relevant to your research**
is the foundation for integrating an equity lens throughout your study
- 2. Integrating an intersectional equity lens into research questions**
helps ensure health inequalities are central to study design
- 3. Designing and conducting research sensitive to inequalities**
requires attention to what data to use, how to obtain and analyse it, and how the findings are interpreted
- 4. Prioritising findings relevant to action on inequalities in reporting and dissemination**
will maximise the positive impact of research
- 5. Principles for research that is sensitive to intersectional inequalities**
highlight responsibilities for researchers and research institutions

HIAT Note Taking Form

Date completed:
Date to be reviewed:

Note-taking Form

1. Mapping inequalities relative to your research

What is the problem you plan to address and which dimensions of social and health inequalities are relevant?

What are the root causes of those inequalities beyond possible behavioural/lifestyle factors? Have you considered how they intersect?

PPI: How have you involved members of the public and other stakeholders in helping you identify the problem you want to tackle and the relevant dimensions of inequalities?



2. Integrating equity issues into research questions

How can your research questions be framed in a way that enables you to identify potential inequalities and explore their causes?

PPI: Have you involved members of the public and other stakeholders in shaping your research questions?



3. Designing and conducting research sensitive to inequalities

Will your study design, data collection, and analytical methods enable you to capture the structural causes of inequalities and identify any differential impacts and experiences?

PPI: How have you involved members of the public and other stakeholders in shaping the study design and in analysing and interpreting the data?

Pitfalls of intersectionality in research

- 1. Homogenizing the experience of individuals** who (a) have a health condition (e.g. diabetes) widely linked to health inequalities or (b) belong to a particular social group obscures the real differences between members of the same group
- 2. Exclusively focusing on ethnicity (e.g. BME) and culture** can mask deeper socio-economic and political inequalities. For example, it can unwittingly send the message that BME's health is poor by virtue of their faulty biology, and it reproduces stereotypes that some cultures are backwards.
[See https://understandingrace.org/pdf/rethinking/lee_farrell.pdf for more](https://understandingrace.org/pdf/rethinking/lee_farrell.pdf)
- 3. Quantitative methodologies** lag a bit behind in terms of methodological approaches to intersectionality. More creative approaches are needed to identify:
 - i. differential outcomes, impact, and experiences
 - ii. the role of structural drivers of inequalities – such as powerlessness, discrimination and stigma – in shaping different outcomes
- 4. Excessively focusing on the 'poorest of the poor' or the most vulnerable** risks focusing only on a small proportion of the society without addressing the structural causes of the inequalities, whilst inequalities may be increasing.

THE ARC NWC PRESENTS

EQUITY LENS

THE HEALTH EQUITY MAINSTREAMING PODCAST SERIES



[#ImplementEquity](#)

Thank you

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