Annex to the final report

Towards a clearing-house for evidence on tackling health inequalities in Europe

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Rationale

Evidence-based policy-making in the field of health inequalities is severely hampered by lack of good evidence on effectiveness of policies and interventions. Because this has now been recognised widely, many new initiatives in this field throughout Europe are being accompanied by evaluation studies of various designs. Because of the complexity of the task, and the practical barriers for conducting evaluation studies, no single country has the capacity to build a comprehensive evidence-base for tackling health inequalities on its own. It is therefore essential to create opportunities for mutual learning from each other's evaluation studies. Not all studies are published in the international (Englishlanguage) literature, however, and even if they are there are considerable time-lags between the availability of the study results and the moment they are published.

A clearing house is needed for pro-active identification, thorough evaluation, and quick dissemination of evidence from around Europe that can help policy-makers at the European, national and local levels to develop rational strategies for tackling health inequalities. The experiences of the EU Network on Policies and Interventions to Reduce Inequalities in Health (now incorporated in the Eurothine network) show that it is useful to make special efforts to collect and evaluate new evidence in this area, because much evidence will otherwise go unnoticed (Mackenbach & Bakker (eds.), Reducing inequalities in health: a European perspective. Routledge, 2001).

Approach

- The scope of the clearing house will be: impact of policies and interventions on socioeconomic inequalities in health, either on purpose or inadvertently, and covering both policies and interventions within and outside the health care sector.
- The clearing house will pro-actively collect scientific evidence, by conducting literature searches, by contacting researchers known to be involved in on-going projects, by identifying unpublished materials through its correspondents, etc. There will be no limits to language.
- The clearing house will classify scientific evidence by policy entry-point (e.g. poverty reduction, smoking cessation, uptake of immunization, ...), study design (from purely observational studies to randomized clinical trials), internal validity criteria (using available checklists), and external validity criteria (using available checklists).
- Each year, the clearing house will also conduct a few systematic reviews or metaanalyses (if scientific evaluation studies of a sufficient quantity and quality are available), and secondary analyses of important evaluation studies (if impacts on health inequalities have not yet been assessed by the principal researchers).
- The clearing house will conduct its operations in close contact with relevant other organizations, such as the Cochrane and Campbell Collaborations (which conduct systematic reviews on an on-going basis, and are gradually incorporating an equity perspective) and the EU Closing the Gap Project (which identifies 'good practice' in the field of tackling health inequalities).
- The clearing house will actively disseminate its findings through a website, reports, publications, conferences, fact sheets and briefings for policy-makers, etc.

Organization and finance

- The clearing house should be based at an institution which has the expertise to carry out the activities listed above, and which has an extensive network of researchers and policy-makers around Europe through whom information can be collected and disseminated efficiently.
- The clearing house should be 'owned' by a network of stakeholders in this field, i.e. researchers and policy-makers interested in identifying evidence on the effectiveness of interventions and policies to tackle health inequalities. A consortium based on one or more existing European networks will be formed, whose members will steer the activities of the clearing house, and will also act as 'correspondents' for different policy areas and/or countries throughout Europe.
- An advisory board with representatives from the European Commission (e.g. DG SANCO), the World Health Organization (e.g. the secretariat of the Commission on Social Determinants of Health), academia (expertise in evaluation, economics,), the Cochrane and Campbell Collaborations, policy institutions (e.g. national institutes of public health), etc. will be formed.
- Because of the relevance of this clearing house for public health throughout Europe, it should be funded by the European Commission, e.g. under a 4-year grant from the Public Health programme which can be renewed if the initiative proves successful. Budgetary requirements include scientific personnel, literature collection, translation costs, advisory board meetings, website construction and hosting, dissemination materials,

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