



Overview of proposed analytical framework

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Outline

- Context
 - Scope of work undertaken so far
- Value judgements about health inequality
 - Inequality between whom
 - Equality of what
 - Equality measured how
- Two stages of analysis
 - Modelling health distributions
 - Ranking health distributions

Context

- Health sector decision making, deliberative process
 - Health benefits, fixed budget and health opportunity costs
 - Improve health: increase health, reduce ‘unfair’ inequalities

The role of the NHS Commissioning Board

- tackling inequalities in outcomes of healthcare.

White paper ‘Equity and excellence: Liberating the NHS.’ Department of Health 2010

Principle 8: When choosing guidance topics, developing guidance and supporting those who put its guidance into practice, the Institute should actively consider reducing health inequalities including those associated with sex, age, race, disability and socioeconomic status.

‘NICE Social Value Judgements: Principles for the development of NICE guidance’. Second Edition 2008

- Further work
 - Widen to public sector; policies with cross-sectoral impact

Characterising health inequality concerns

- Health inequality
 - Differences in health, however measured
 - Can be identified empirically
- Unfair health inequality
 - Value judgement that difference is unfair or unjust
 - Not all people will judge same health difference to be unfair
 - Contestable factual beliefs about causes/determinants
 - Heterogeneous and labile
- Desired qualities of proposed framework
 - Make explicit the embedded value judgements
 - Allow exploration of alternative sets of social value judgments

Analytical choices and social value judgements

- Analysing and quantifying health inequality
 1. Inequality between whom
 - Characterising which inequalities are **unfair**
 2. Equality of what
 - Characterising what we mean by **health**
 3. Equality measured how
 - Characterising what we mean by **inequality**
- **Source of value judgements**
 - Society, legitimate social decision maker
 - Elicit from relevant decision maker?
 - Emerge from deliberative decision making process?
 - Assume cannot be fully specified

Inequality between whom?

- Factors that *may* influence judgement about fairness
 - 1. Remediability or avoidability
 - Are effective actions available
 - Within remit, within time frame, within scope?
 - May be informed by cost effectiveness analysis
 - 2. Compensability
 - E.g. cause specific not remediable but prioritise elsewhere
 - Or cross-sector compensate by non-health benefits
 - Further work when widen scope to multiple sectors
 - 3. Individual responsibility or choice vs circumstance
 - May require modelling causal pathways to attribute differences to relevant determinants

Equality of what?

- How to measure health
 - Initially we assume
 - cardinal scale (e.g. Quality Adjusted Life Years)
 - ability to express all outcomes in common numeraire
 - Health benefits, opportunity cost of resources in terms of health forgone
 - Possible to also do so for quantified level of inequality?
- Value judgement about distribuendum
 - Changes in health attributed to intervention
 - Lifetime health level
 - Health poverty or shortfall from target level
 - Requires consideration of appropriate target

Equality measured how?

- A given change in the distribution in health will affect
 - Relative inequality (e.g. ratio between two groups)
 - Absolute inequality (e.g. gap between two groups)
 - Shortfall inequality (e.g. number falling short of target)
- Inequality concern may reflect combination of these
 - Consider how to report results to allow decision maker to judge ‘improvement’ in inequality
 - Can inequality be assessed separately from total health?
 - E.g. report standard CEA results and additional information on inequality

Modelling health distributions

1. Specify inequality between whom, equality of what and equality measured how
 2. Quantify health distribution and impact of intervention on distribution
- Need to consider
 - Limitations of available evidence
 - Representing uncertainty and sensitivity analysis
 - Potential pitfalls, e.g.
 - embedding value judgements in ‘black box’
 - misrepresenting value judgements in oversimplified analysis
 - When is additional analytical effort worthwhile?

Alternative approaches

- Consider for univariate (unadjusted) and bivariate
 - What sets of value judgements can be represented?
 - What are the data requirements and practical issues?
 - How will results compare to multivariate approach?

Informing decisions

- Dominance criteria
 - Increase overall population health and decrease inequality of all kinds
 - Consistent with broad range of social value judgements
- Additional value judgements required to choose
 - Intervention that increases overall population health and increases inequality
 - Intervention that decreases overall population health (relative to alternative course of action) and decreases inequality
- Aim to consider
 - What information to present to facilitate decision making
 - Transparency and consistency in decision making over time
 - Comparability across decision problems