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| **A systematic review of community health assessment (CHA) tools** |
| **Background/Objectives**To close the gap on health inequities the Commission on Social Determinants of Health (CSDH) identified the need for improved routine monitoring of the social determinants of health (SDoH), highlighting the importance of fitness for purpose and context with regard to evidence on SDoH. To build an effective health equity surveillance system, they argued that data must be examined locally and that local communities should have an integral role in the overall surveillance process. Community health assessments (CHAs) are an important sub-national or local form of data collection on SDoH, and their iterative nature means they could also serve as a monitoring function. In addition to the recommendations of the CSDH, policy changes such as the Affordable Health Act and the Health and Social Care Act, have driven the need for conduct of CHAs. Whilst guidelines exist on elements of the process of conducting a CHA, data collection is often ad hoc or reactive to a particular issue.**Methods**Two systematic reviews of peer reviewed and grey literature, published in English between 2008-2018 were conducted by an interdisciplinary team to firstly: report on the quantity and nature of the available literature; identify published tools used to conduct CHAs; identify and assess how CHA tools capture and report the SDoH; and evaluate whether this was consistent with the recommendations of the CSDH. In the second review, CHA tools were assessed for the level of community participation and the processes that facilitated, prescribed, or captured that participation.**Results** The requirement for local health authorities to conduct CHA to meet policy requirements in several countries has seen a significant increase in the number and types of CHAs being conducted. A number of common approaches and tools were identified and the focus on both SDoH and community participation varied significantly. **Discussion**From our assessment of identified tools, we propose a minimum data set for CHA tools that facilitates community participation and ensures CHAs contribute to strengthening the evidence base of SDoH and health inequities that over time can also provide a monitoring function recommended by the CSDH. Adaptation to local contexts and needs can still be undertaken to ensure utility of the CHA to local health planning.**Keywords**Community health assessmentHealth inequitiesSocial determinants of healthNeeds surveillance |