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| **Planning for Equity: A New Zealand Case Study of Health Equity Assessment (HEA)** |
| **Background/Objectives**Health equity is a key issue for health promotion globally. In New Zealand, the 2008 Health Equity Assessment Tool (HEAT Tool)[[1]](#endnote-1) is a key resource for Health Promoters to advocate for a health equity agenda. Given the persisting inequities for Māori and the increasing recognition by the health sector of its responsibility under Te Tiriti o Waitangi, the use of health equity tools such as HEAT is an undeveloped domain warranting research attention. This study used Taranaki District Health Board as a case study to explore how the HEAT Tool has been employed to apply a critical health equity planning lens. **Methods**Case study analysis of three HEAs conducted on health services and health promotion programmes. Data was collected from a stakeholder workshop, key informant interviews and documentary analysis. The results were analysed using the revised Conceptual Framework for Evaluating the Impact and Effectiveness of Health Impact Assessment.[[2]](#endnote-2)**Results**The case studies demonstrated that HEA successfully highlighted geographic, ethnic and socioeconomic inequities and was effective at identifying equity focused improvements. Reported strengths were the emphasis on consumer voice; support for Māori health goals, depersonalisation of issues by critiquing systems; use of robust data; systematic assessment process and accountability for action. Organisational and resourcing barriers were key challenges identified in undertaking HEA. Equity positive changes were reported in all case studies despite challenges experienced implementing HEA recommendations. Participants reported a stronger equity focus in ongoing planning and prioritisation. The study concluded that HEA was successful at improving the consideration of equity in planning. **Discussion**HEA is a proven approach for systematically considering inequities in health planning. A decade on from its development, the HEAT Tool remains an important mechanism for drawing attention to existing health inequities and advocating for an equity agenda by decision makers. By challenging the structures and practices that maintain inequities for Māori, the HEAT Tool may support mainstream health organisations to operationalise Te Tiriti o Waitangi and offer a platform for transforming institutional racism and privilege in the New Zealand health system. The implications from this case study for equity initiatives in other jurisdictions will be explored.**Keywords**Health equity, equity, inequities, HEAT, Māori health. |

1. Signal, L., Martin, J., Cram, F., and Robson, B. (2008) The Health Equity Assessment Tool: A User’s Guide. Wellington: Ministry of Health [↑](#endnote-ref-1)
2. Harris-Roxas, B., Haigh, F., Travaglia, J., & Kemp, L. (2014). Evaluating the impact of equity focused health impact assessment on health service planning: three case studies. *BMC Health Services Research*, *14*, 371. http://doi.org/10.1186/1472-6963-14-371 [↑](#endnote-ref-2)