School for Public Health Research

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Addressing Health Inequalities in the Early Years through Community-Informed Services: A Realist Investigation

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Involving community members in the design and development of services on offer to them is pivotal for improving uptake and addressing health inequalities. However, when and how involvement translates into meaningful change in services is poorly understood.

Place-based services seeking to reduce early years health inequalities, such as those within the Family Hubs models, are actively seeking to involve local families in decision-making. Doing so aids them to understand and reduce barriers to access, enhance cultural appropriateness, and align services to community need.

Unfortunately, practitioners currently have a poor understanding of how to ensure that communities are not just listened to, but truly heard. Translating feedback into real change in services is not always achieved which can lead to disempowerment and damaged relationships.

Community involvement is applied through a wide range of initiatives, with highly varied communities, and within a multitude of organisational contexts; it is highly contextually bound, and difficult to capture meaningful and transferable learning to guide practice. The evidence-base is fragmented and research to date has struggled to synthesise actionable insights.

Practitioners require innovative methods to leverage existing evidence and progressing learning from practice to better integrate community voices into early years support

This research project thus seeks to explore the following

question:

Situated in layers of complexity

Complex Settings and systems

Complex Settings and systems

The evidence around community involvement...

What are the key generative interactions which explain when, how, why, and in which contexts community involvement contributes to changes in services which are intended to promote the reduction of early years health inequality?

Methods

This project applies scientific realism to take a theory-driven approach which can make use of current evidence, tacit knowledge, and evolving practice.

• Stakeholder consultation: To conceptualise the work and set the scope for a literature review. Consulation partnered with non-systematic literature searching utilised to develop an initial programme theory to explore the facilitative mechanisms and contexts which might be involved in achieving service change with community involvement, and what changes we are aiming for.

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- Realist literature review: To test and refine the programme theory by configuring grey literature (research, learning, and blogs published by services of interest) with academic literature.
- Realist evaluation: Case studies of 2 distinct services to gather primary data (via ethnograhy, realist interviewing) to take a detailed dive into the phenomena, theory, and change over time.

Impact and Dissemination

This research aligns with national policy priorities by supporting responsive service development that reflects community need and promotes health equity. Tackling the topic through a realist approach will enable the production of recommendations recommendations and facilitative guidance for practitioners, service leaders, and commissioners.

This work will contribute to bridging the gap between engagement aspirations and outcomes, fostering more equitable early years health services



Results from this research will be published in peerreviewed journals and disseminated at conferences.



Lay-facing reports will also be co-produced with an expert advisory group, with a dissemination strategy also co-produced, to drive impactful knowledge exchange.

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