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Editorial

Investing in research infrastructure to address health inequalities: Learning by doing



Action is needed to address socioeconomic inequalities in health with decision making required at all levels of government and across society. Yet, decision making in this cross-sector area is often difficult. This is perhaps because there are differences in what people understand and mean by inequalities, underpinned by the language used, value judgements and political ideology [1–3] and this limits action. Evidence, driven by research and practice, can help to inform complex and nuanced decision making and underpin focussed action. Integrating research into decision making, at all levels, is needed to identify actions to address pervasive socioeconomic inequalities in health.

Multidisciplinary, applied research on the wider determinants of health helps increase our understanding of what enhances and influences health. It can also contribute to the identification, co-design, and evaluation of interventions designed to address inequalities. Research can help us focus and be more precise about what we mean when we use the term health inequality and the population groups and health outcomes we are trying to improve.

In the UK there are new initiatives whereby local government is funded to boost its research capacity and capability to take evidencebased action across the wider determinants of health. Most recently, the UK's National Institute for Health and Care Research (NIHR) Public Health Research Programme has invested in research infrastructure to support capacity building in local government with the recent announcement of the Research Support Service Specialist Centre for Public Health [4]. To date, the NIHR have funded 30 Health Determinants Research Collaborations (HDRCs) [5] based in local authorities. HDRCs are intended to enable local authorities to use and conduct high quality research into the wider determinants of health. This welcome investment is a recognition of the considerable influence of local government on the social, economic, and environmental factors that influence health. It is also an acknowledgement of the need to invest in research capacity building within UK local government to research these issues in partnership with Universities.

The first cohort of HDRCs have just celebrate their first year and there are examples of early successes. They are increasing research activity through competitive research funding, for example, HDRC South Tees and Teesside University have been awarded a development award from the NIHR Work and Health Research Programme [6]. The collaborative project (which includes HDRCs in Gateshead and Doncaster) will focus on getting people with health problems who live in poorer areas back into employment. Another example of an early success is the use of embedded professorial researchers from HDRC Doncaster within the City of Doncaster's Fairness and Well Being Commission. These embedded researchers were able to support rapid review of evidence and the development of a logic model demonstrating the linkages

between income inequalities and essential aspects of well-being [7].

HDRCs are not the only programme trying to take research capacity to where it is most needed. Over the past 2 years via the NIHR Local Clinical Research Networks funding has been made available to support embedded public health researchers in Local Authorities. The concept aims to bridge links between where research is produced and where it should be applied. In intends to produce research evidence that more closely matches the need of decision-makers. As the impacts of these roles becomes known there is initial evidence that embedding researchers into local authorities does support positive early research culture changes and it is clear that demand for such individuals in high [8].

We look forward to reading and publishing work from these UK initiatives and learning from their efforts to build research capacity to increase understanding and knowledge on the wider determinants of health and specifically the research they generate about evidence based action to address health inequalities. We also welcome articles from other countries about national and local initiatives to address socioeconomic inequalities in health. We will seek to publish much research on this theme, sharing best practice, pitfalls and learning, within and across countries.

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