

REQUEST FOR ASSISTANT DIRECTOR DECISION – ADD2692

Title: Building the Evidence for Health Inequalities – Tackling Ethnic Health Inequalities Structural Racism

This decision seeks approval for expenditure to support the Building the Evidence for Health Inequalities work programme, as part of the London Health Inequalities Strategy. This is to support the co-production of a set of recommendations, building on the Institute for Health Equity (IHE) evidence review on tackling structural racism as a determinant of health in London. This work is supported by the Office for Health Improvement and Disparities (OHID) London, and this decision also includes a financial contribution from them for this work conducted by the IHE.

Decision:

That the Assistant Director of Health, Children and Young Londoners approves:

1. expenditure of up to £20,000 for a partner organisation to co-produce with communities and other stakeholders a set of London recommendations, aligned with the Institute for Health Equity evidence review on structural racism and health inequalities
2. receipt of income of £10,000 from the Office for Health Improvement and Disparities London as a contribution to the Building the Evidence project.

AUTHORISING ASSISTANT DIRECTOR / HEAD OF UNIT

I have reviewed the request and am satisfied it is correct and consistent with the Mayor's plans and priorities.

It has my approval.

Name: Jazz Bhogal

Position: Assistant Director, Health, Children and Young Londoners

Signature:



Date:

08/01/2024

PART I - NON-CONFIDENTIAL FACTS AND ADVICE

Decision required – supporting report

1. Introduction and background

- 1.1. This work programme is part of the Mayor's Health Inequalities Strategy. It comprises of activity to inform the evidence base on London health inequalities, and to support pan-London activity to tackle health inequalities. It is linked to the work of the London Anti-Racism Collaboration for Health – a key commitment of the London Health Inequalities Strategy - and to the London Partnership Board work programme on Building a Fairer City through tackling structural inequalities and improving equity in public services.
- 1.2. In 2022 a grant agreement was agreed with University College London's Institute for Health Equity, to support their work to develop the evidence for action on health inequalities. This has resulted in a series of intervention evidence reviews focused on London and London priorities. This decision focuses on one of the evidence reviews in this Building the Evidence work programme, which looks at structural racism and health inequalities in London. This evidence review has included input from a range of expert stakeholders, including through a cross-sector advisory board and some community engagement on a draft of the report.
- 1.3. This decision is to procure the services of an organisation to lead the co-production of a set of recommendations, building on and complementing the IHE report.
- 1.4. The Office for Health Improvement and Disparities London is one of the partners involved in this work programme. It has offered to contribute £10,000 to support the IHE's work on this project; which it is providing to the GLA as the GLA hold the agreement with IHE. The payment to IHE is not covered in this decision, but set out in a Delegated Authority Record.

2. Objectives and expected outcomes

- 2.1. The primary objective of the Building the Evidence programme is to improve the health inequalities evidence base for London – to give statutory and other organisations a better understanding of some of London's health inequalities challenges, and what effective action can be taken to address them. This decision relates specifically to the evidence review focusing on structural racism as a determinant of health, and the need to have a better understanding in London of what we can do to make a difference to Londoners lives and address ethnicity-related health inequalities.
- 2.2. The primary outcome of the proposed expenditure will be a set of co-produced action-focussed recommendations for London, building on, and helping to mobilise, the fundings of the IHE evidence review. This is expected to be completed by June 2024.

3. Equality comments

- 3.1. The project is explicitly focused on reducing health inequalities in London, and in particular those experienced by Black, Asian and minority ethnic communities, due to structural racism. Health inequalities are differences in health that are unnecessary, avoidable, unjust and unfair. They

often exist between groups of people with protected characteristics, and who experience poverty and socioeconomic deprivation.

- 3.2. This work aligns with the Mayor's Equality, Diversity and Inclusion Strategy Objectives (2022). In particular Objective 12, which commits to address the reasons for health inequalities that cause some groups to experience poorer physical and mental health outcomes.
- 3.3. The work programme to build the health inequalities evidence base is part of the London Health Inequalities Strategy. The specific focus on structural racism as a driver of health inequalities is a key commitment of the London Health Inequalities Strategy (as published in the 2021-24 implementation plan).
- 3.4. Addressing structural racism is also part of the London Partnership Board (formerly London Recovery Board) work programme on addressing structural inequalities – Building a Fairer City. The Building a Fairer City action plan (2022) set out (under the priority area of Equity in Public Services) a specific action on tackling structural racism, which the evidence review will directly inform.

4. Other considerations

Risks and issues

- 4.1. To ensure that this work is undertaken to the standard required, within the time available (noting the potential impact of the pre-election period on project activity), we are seeking to engage a member of the existing advisory board in its delivery. This will guarantee the delivery partner will have a good understanding of the nature and context of the evidence review work and what it is seeking to achieve, as well as having specific expertise in race equity and co-production. Meeting the timetable set out below will be more challenging should a delivery partner need to be identified outside the advisory board membership.

Links to Mayoral strategies and priorities

- 4.2. This work is linked to the Mayor's Health Inequalities Strategy, which sets out plans to tackle unfair differences in health to make London a healthier, fairer city. Health inequalities are inextricably linked to other types of inequality. This is because they are most often a direct result of inequalities in other areas of life, i.e. socioeconomic differences. The strategy outlines key actions to address the socioeconomic causes of poor health (the social determinants).
- 4.3. It is also linked to the Building a Fairer City work programme on the London Partnership Board, to the commitment of the London Health Board to tackle structural racism and be actively anti-racist, and the Mayor's manifesto commitment concerning improving trust and confidence in public services.
- 4.4. There are no conflicts of interest to note for any of the officers involved in the drafting or clearance of this decision form.

5. Financial comments

- 5.1. Approval is sought for the following;

- Expenditure of up to £20,000 for a partner organisation to co-produce with communities and other stakeholders a set of London recommendations, aligned with the Institute for Health Equity evidence review on structural racism and health inequalities
- Receipt of income of £10,000 from the Office for Health Improvement and Disparities (OHID).

5.2 The expenditure of £20,000 will be funded from the HIS implementation budget in the Health team; £10,000 is to be spent in 2023-24 financial year and £10,000 to be spent in 2024-25 financial year

5.3 There is sufficient budget to meet the £20,000 expenditure from the HIS implementation budget across 2023-24 and 2024-25 financial years.

5.4 Funding for future financial years are subject to the annual budget setting process and subject to change. Any contracts that commit the GLA in future years are subject to appropriate break clauses.

6. Planned delivery approach and next steps

Activity	Timeline
Agree delivery partner for co-production	January 2024
Engagement activity to co-produce recommendations	January – March 2024
Final report	June 2024

Public access to information

Information in this form (Part 1) is subject to the Freedom of Information Act 2000 (FoIA) and will be made available on the GLA website within one working day of approval.

If immediate publication risks compromising the implementation of the decision (for example, to complete a procurement process), it can be deferred until a specific date. Deferral periods should be kept to the shortest length strictly necessary. **Note:** This form (Part 1) will either be published within one working day after it has been approved or on the defer date.

Part 1 - Deferral

Is the publication of Part 1 of this approval to be deferred? NO

Part 2 – Sensitive information

Only the facts or advice that would be exempt from disclosure under FoIA should be included in the separate Part 2 form, together with the legal rationale for non-publication.

Is there a part 2 form – NO

ORIGINATING OFFICER DECLARATION:

Drafting officer
to confirm the
following (✓)

Drafting officer

Karen Steadman has drafted this report in accordance with GLA procedures and confirm the following:

✓

Corporate Investment Board

A summary of this decision was reviewed by the Corporate Investment Board on 8 January

✓

ASSISTANT DIRECTOR FINANCIAL SERVICES:

I confirm that financial and legal implications have been appropriately considered in the preparation of this report.

Signature:

Anna Gustaf

Date:

08/01/2024