

The Health Education Board for Scotland

Mary Duffy

As British society in general has grown richer in recent decades, the gap between the richest and the poorest has also grown. In Scotland, as elsewhere, many problems are associated with this widening gap. The death rate in 1991 in the most affluent areas was 19% below the Scottish average (for all ages), whilst in the most deprived regions it was 31% above the average.¹

Health inequalities are given particular emphasis in the White Paper, *Towards A Healthier Scotland*², with the social circumstances that are both causes and effects of poor health singled out for attention, together with lifestyles and health topics. In order to ensure that inequalities in health are reduced, the White Paper outlines how sustained and focused the efforts need to be in many fields.

The Health Education Board for Scotland (HEBS)

In this policy context, there is an obvious role for HEBS as the national agency for health education. HEBS' main outputs are delivered through a set of programmes centred on schools, the health service, the workplace, the voluntary sector and the community setting. Alongside these, work occurs in the mass media, in education and training, in health information, in publishing and in research. Working in partnership with others at local, national and international level, HEBS aims to help people increase control over their health and to support those directed towards changing the social, environmental and economic conditions that create and sustain health inequalities.

The role of Research & Evaluation at HEBS

HEBS takes an evidence-based approach to health promotion, gathering information on the needs and problems of specific groups and on the effectiveness of interventions. This work is carried out by the Research & Evaluation (R&E) Division, a team of four topic-specific and four generalist researchers. As well as commissioning and disseminating HEBS' research, the R & E Division contributes to national and international initiatives supporting the development of policy frameworks for vulnerable groups. Ongoing work includes:

- Ongoing work on smoking, including a focus on women and low income and a published smoking cessation policy for Scotland produced jointly with ASH Scotland;
- An advisory role in the evaluation of the New Opportunities Fund Healthy Living Centres, the Social Inclusion Partnerships initiative, the National Health Demonstration Projects for Scotland and the Scottish Community Diet Project;

- A contribution to the development and testing of indicators and frameworks to monitor and evaluate progress towards improving health in disadvantaged communities.

A new series of publications planned for 2000 will provide evidence-based recommendations for action in a number of key areas, including those highlighted by the National Health Demonstration Projects. Also important will be the consolidation and expansion of the HEBS *Research Centre* on the Internet (www.hebs.scot.nhs.uk/research), together with other work with UK and international partners to develop a database of evidence for health promotion. These should help to further improve the evaluation of interventions and the effective communication of findings to inform those actions aimed at reducing health inequalities in Scotland.

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References

1. Figures from the Common Services Agency, Information and Statistics Division, quoted in Pavis, S. & Platt, S. (1998) *Health Inequalities: the Major Challenge for the New Scotland*. Background Paper for the conference 'Inequalities, Health and the New Scotland' 12 June 1998, Edinburgh. Research Unit in Health and Behavioural Change, University of Edinburgh: pg 11. (www.ruhbc.ed.ac.uk)
2. The Secretary of State for Scotland (1999) *Towards a Healthier Scotland*, Edinburgh: the Stationery Office. (www.scotland.gov.uk/library/documents-w7/tahs-00.htm)