

EquiFrame: Better Policy for All

Just how good are your health and welfare policies? And are they better for some people than for others? How can you be sure you are developing or revising policies in line with best practice?

These are some of the questions addressed by *EquiFrame* a new policy analysis framework - launched in 2011 - for assessing the degree to which different vulnerable groups and core concepts of human rights feature in existing policies. *EquiFrame* can also be used to guide policy revision and development.

EquiFrame is a product of the European Commission FP7 funded project – EquitAble. The consortium - led by Prof Malcolm MacLachlan from the Centre for Global Health & School of Psychology, Trinity College Dublin – is looking at barriers and facilitators for accessing health services; recognising that health services cannot hope to be equitable if they are not equally accessible for all. EquitAble project manager Dr Hasheem Mannan, explained that “while access for people with disabilities is our primary focus, we also recognise that access to healthcare is problematic for a whole range of other vulnerable groups – such as displaced people, the aged and ethnic minorities” As there was no way to systematically evaluate this, the European (Ireland and Norway) and African (Sudan, Namibia, Malawi and South Africa) partners developed the *EquiFrame* methodology, which is applicable to national, regional and international health and welfare policies, and they have used it on over 70 such policies.

The EquitAble project work package which developed *EquiFrame* was led by Prof Mutamad Amin, Director of Research at Ahfad University for Women, Sudan; a former Minister of Health.

Drafts of the framework were ‘road tested’ at **consultation workshops attended by over 100 participants, including civil servants**, policy makers and members of different vulnerable groups, including people with disabilities. *EquiFrame* produces scores for Core Concept Coverage, Vulnerable Group Coverage and Core Concept Quality, the latter relating to specification of policy actions and intention to monitor.

The World Report on Disability, published in 2011, estimates that around 1 billion people, or 15% of the world’s population, have a disability – but, says Prof Amin, “our health and welfare policies do not reflect this. Now we have a means of systematically addressing our obligation to tackle this oversight”; an obligation enshrined in the UN Convention of the Rights of Persons with Disabilities. Prof Amin and Prof MacLachlan want every country to assess to what extent their health and welfare policies reflect core concepts of human rights and address the most marginalised and vulnerable. They argue that “while actual policy implementation is critical - good implementation of poor policies is not in anyone’s interests”.

The *EquiFrame* Manual is free to download (www.projectequitable.org) and a research paper on *EquiFrame* is published in the December, 2011, edition of the open-access journal *Health & Human Rights*. The *EquiFrame* team have already run a workshop for the Government of Malawi, contributing to the revision of their National Health Policy. Future *EquiFrame* Workshops are planned and further details are available from szewczyk@tcd.ie or by visiting the Centre for Global Health website (www.global-health.tcd.ie)

“There is nothing more unequal, than the equal treatment of unequal people”.

Thomas Jefferson

