

Inclusive Research Methods: Case Studies

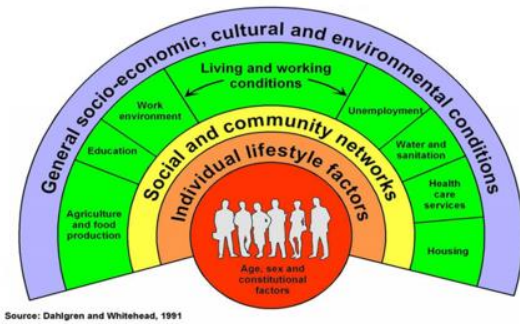


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Determinants of Health



Source: Dahlgren and Whitehead, 1991



Inclusive research

- People in studies have better outcomes

Good Science

- Studies reflect our population and needs

Reduce Inequalities

- Good science through inclusive research

Why is Research Inclusion Important?

Social
Justice



Social
Justice



What have we been doing?

- Training and capacity building
- Whole systems approach
- Resources and reports
- Rapid Cycle Evaluation
 - IR Maturity Matrix
- Participatory Research Methods

NIHR | Manchester Biomedical Research Centre

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BRC Staff Information

Research Inclusion Resources

15 January 2025

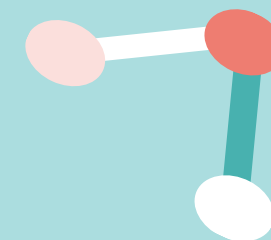
Communities at the centre of research into health inequalities

Nested Rapid Evaluation Approaches

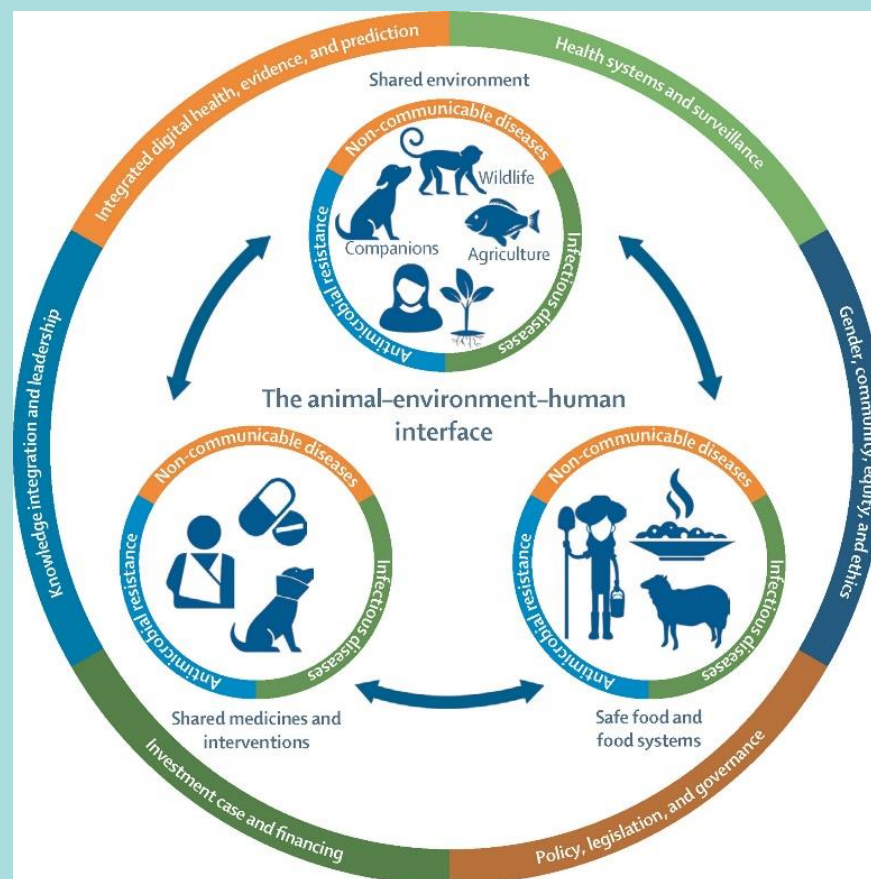
Strategic Control	Environmental Feedback	Systems-Based Evaluation
	System Capacity	
Management Control	Organizational Outcomes	Rapid Cycle Evaluation
Task Control	Process Improvements	Continuous Quality Improvement

Act, Plan, Do, Study

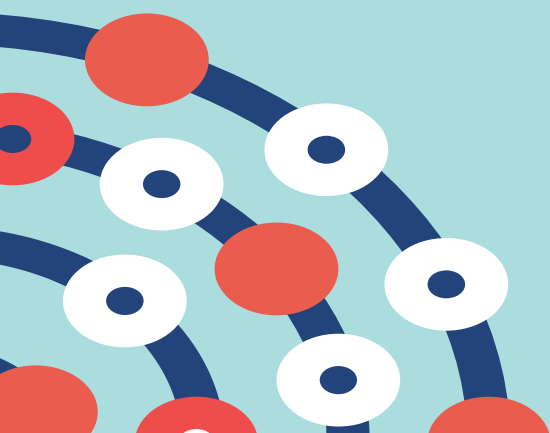
Participatory Research Methods: Why Does It Matter?



We aren't
hard to
reach



But we are
easy to ignore



Ottawa Charter 1986

We need policies that make 'the healthy choice the easy choice' for all people, especially the most vulnerable

Healthy consumption

Impact on environment/ecosystems

Approaches to participation

Approach	Aims	Methods	Worker/client relationship
Medical	To identify those at risk from disease	Screening, individual risk assessment e.g. BMI	Expert-led, Passive, conforming client
Behaviour change	To encourage individuals to take responsibility for their own health and choose healthier lifestyles	Persuasion 1 to 1, mass-media campaigns.	Expert-led, Dependent client, possible victim blaming ideology
Educational	To increase knowledge and skills about healthy lifestyles	Information and exploration of attitudes through individual or small group work. Development of skills, e.g. cooking healthy meals	May be expert-led, May also involve client negotiation of issue for discussion
Empowerment	To work with clients or communities to meet their perceived needs	Advocacy; negotiation; networking; facilitation.	Health promotor is facilitator client becomes empowered
Social change	To address inequalities in health based on class, race, gender, geography, adopting a population perspective	Organisational policy, e.g. hospital catering Public health legislation, e.g. food labelling, lobbying, fiscal controls	Social regulation, top down



Meaningful
Specific
Trusted relationship

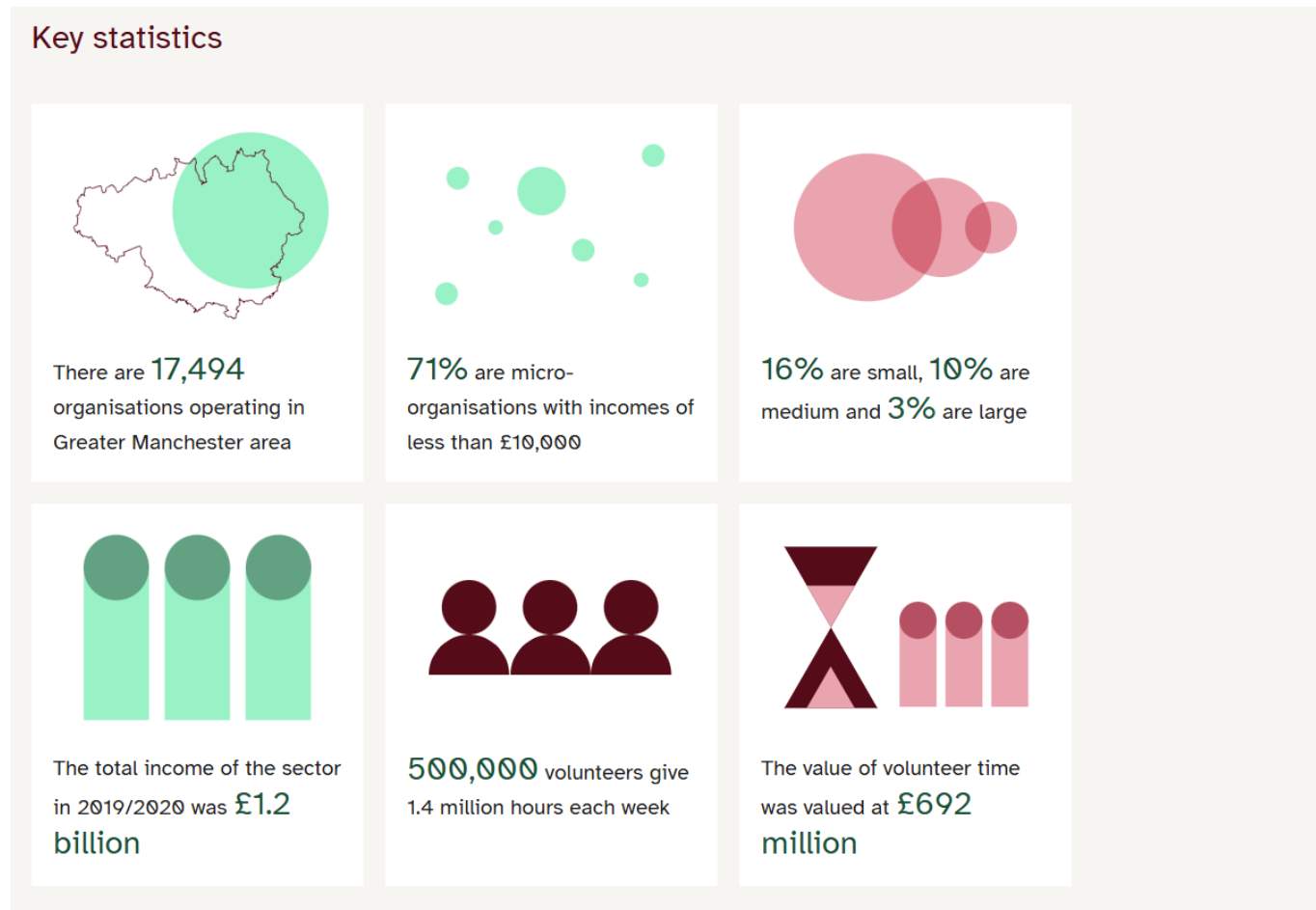
<https://www.vcfseleadershipgm.org.uk/about-us/about-the-gm-vcse-sector>

21% support economic wellbeing, debt, employment and poverty

29% support physical activity, sport and leisure

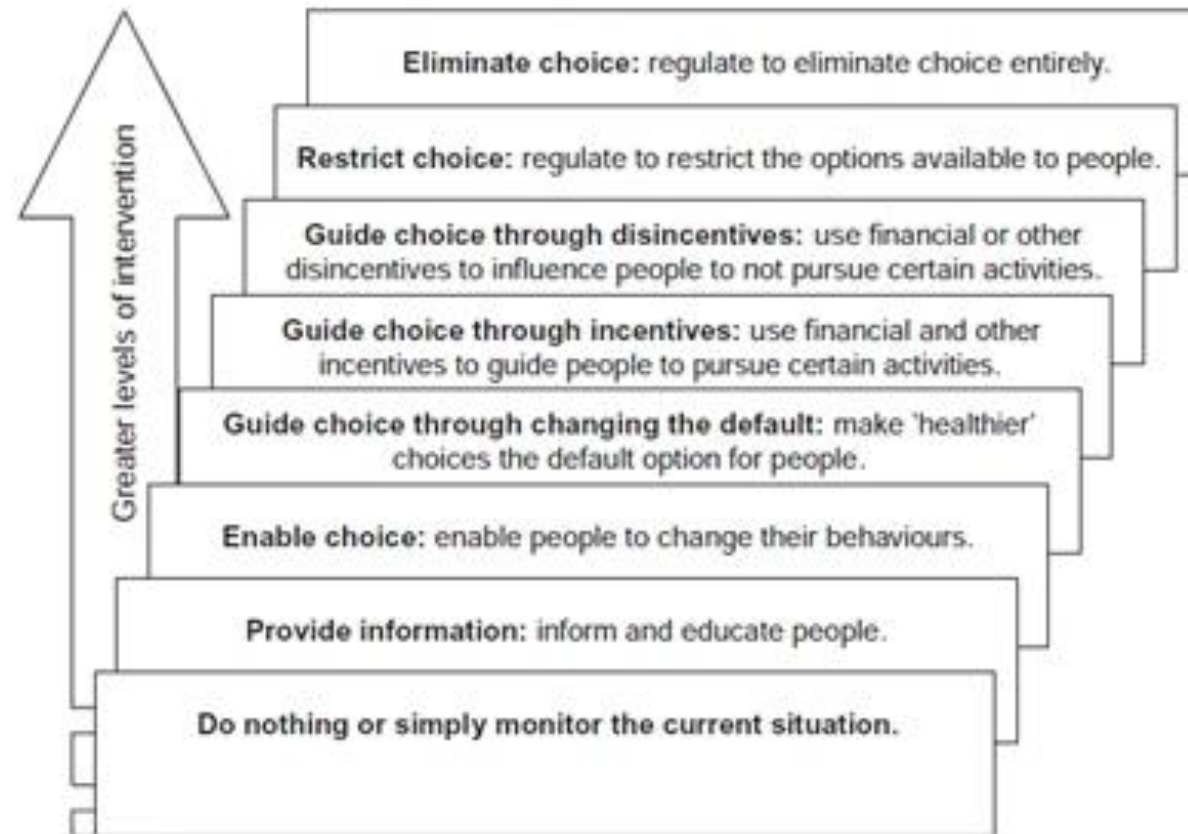
50% support community development and tackle inequality

28% support wellbeing, health and care needs

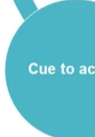


Ladder of Intervention

Nuffield Council on Bioethics' Intervention Ladder



Area of change	Theories or models
Theories that explain health behaviour and health behaviour change by focussing on the individual	Health Belief Model Theory of Reasoned Action / Planned Behaviour Transtheoretical (Stages of Change) Model Social Learning Theory
Theories that explain change in communities and community action for health	Community mobilisation <ul style="list-style-type: none"> • Social planning • Social action • Community development Diffusion of Innovations
Theories that guide the use of communication strategies for change to promote health	Communication for behaviour change Social marketing
Models that explain changes in organisation and the creation of health-supportive organisational practices	Theories of organisational change Models of intersectoral action
Models that explain the development and implementation of healthy public policy	Ecological framework for policy development Determinants of policy making Indicators of health promotion policy



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- 6. S
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Behaviour change to Asset based



SUSTAINABLE COMMUNITIES



A GUIDE
TO COMMUNITY
ASSET MAPPING



FALLS
BROOK
CENTRE

Typical

- Focus
- Proj
- Char
- 'Exp
- Gran
- Serv
- High
- Peo
- Aim
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- Mai



ABCD)

gboard

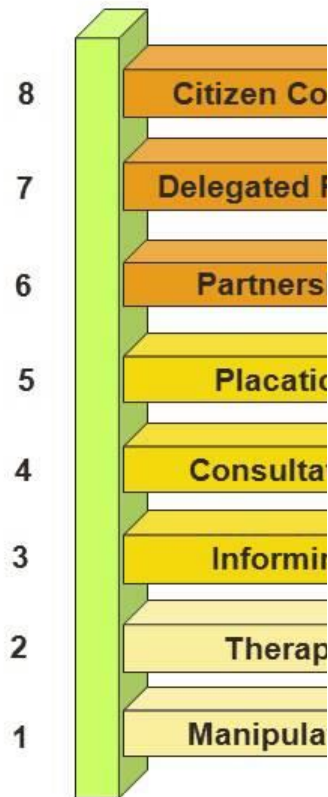
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The Ladder of Citizen Participation (Arnstein)



Perspective

What is the point of citizen participation in health care?

Ellen Stewart

Abstract

Does citizen participation in health care planning and provision have a clear purpose? Can it reasonably be considered a unified phenomenon? Current conceptual accounts – including a range of typologies descended from Arnstein's ubiquitous but misunderstood 'ladder of participation' – are inadequate. The popularity of citizen participation belies fundamental uncertainties about what it entails and its associated benefits. A more pragmatic and less normative usage of the term is vital for the future.

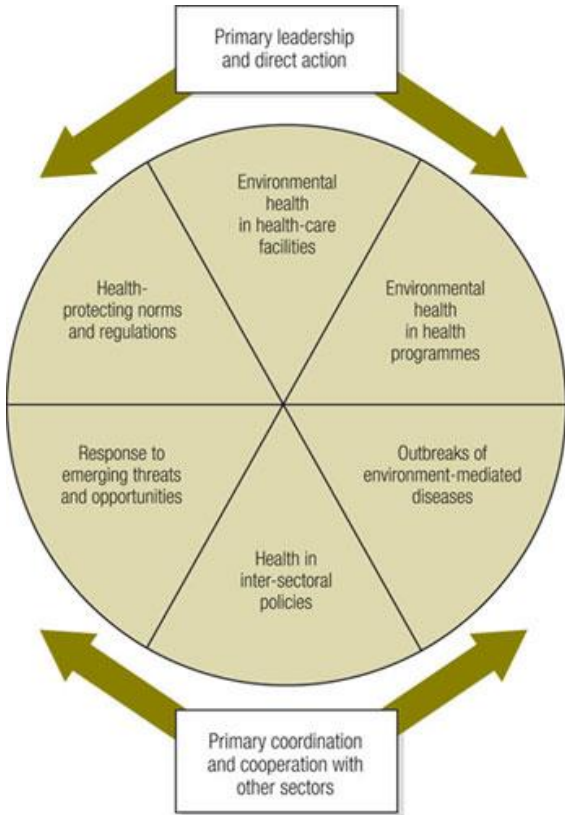
Keywords

ladder of participation, policy making, public participation

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Policy
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DOI: 10.1177/1355819613485670
jhsrp.sagepub.com



Intersectoral Actions



Strengthening foreign policy and development cooperation



- Health higher on the global agenda
- New roles for Ministers and Ministries of Health
- European Region leadership in global health

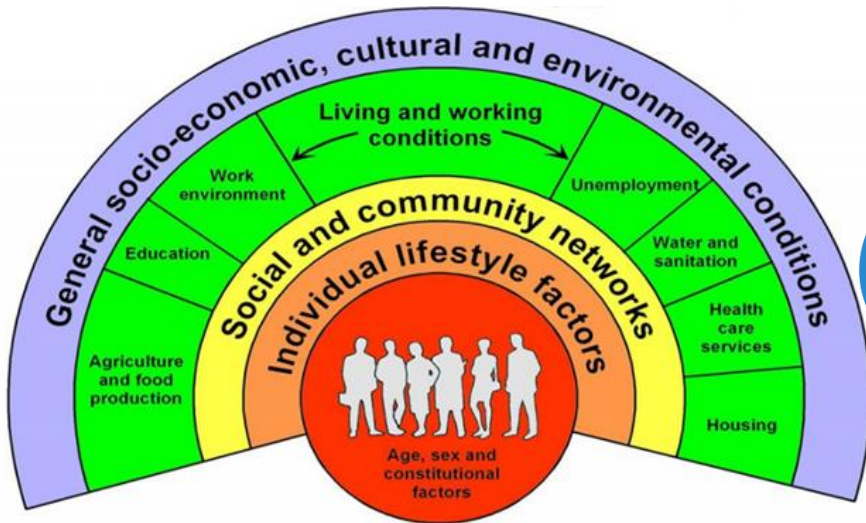
World Health Organization
 WHO REGIONAL COMMITTEE FOR EUROPE - 65th SESSION
 Vilnius, Lithuania, 14-17 September 2015

The Health Gradient

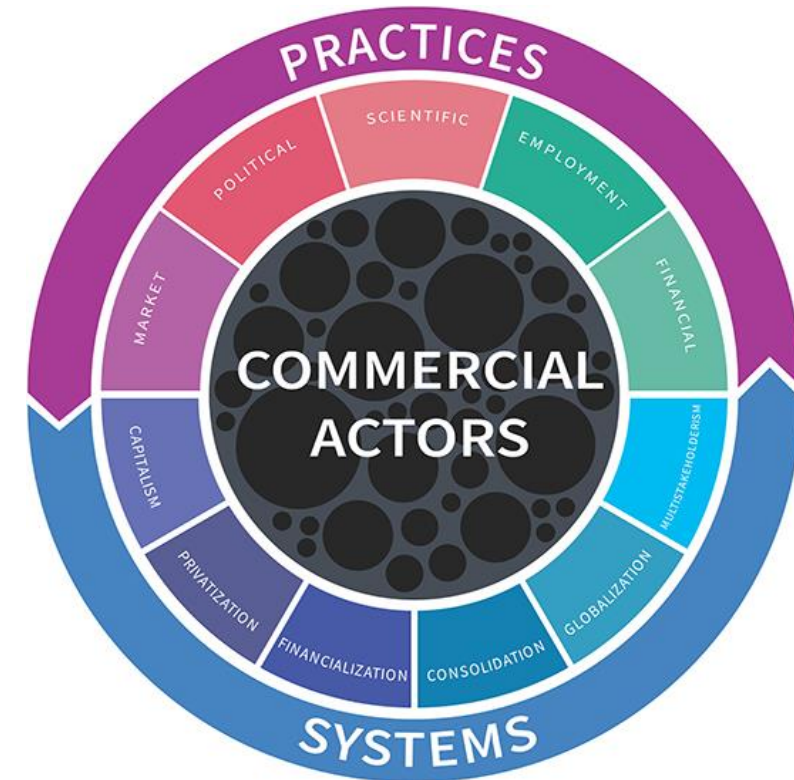


Source: *Making Partners: Intersectoral Action for Health* 1988 Proceedings and outcome of a WHO Joint Working Group on Intersectoral Action for Health, The Netherlands.

Determinants of Health

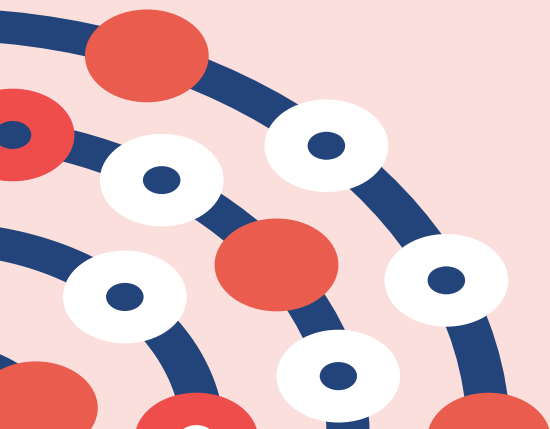


Source: Dahlgren and Whitehead, 1991





Case Stories

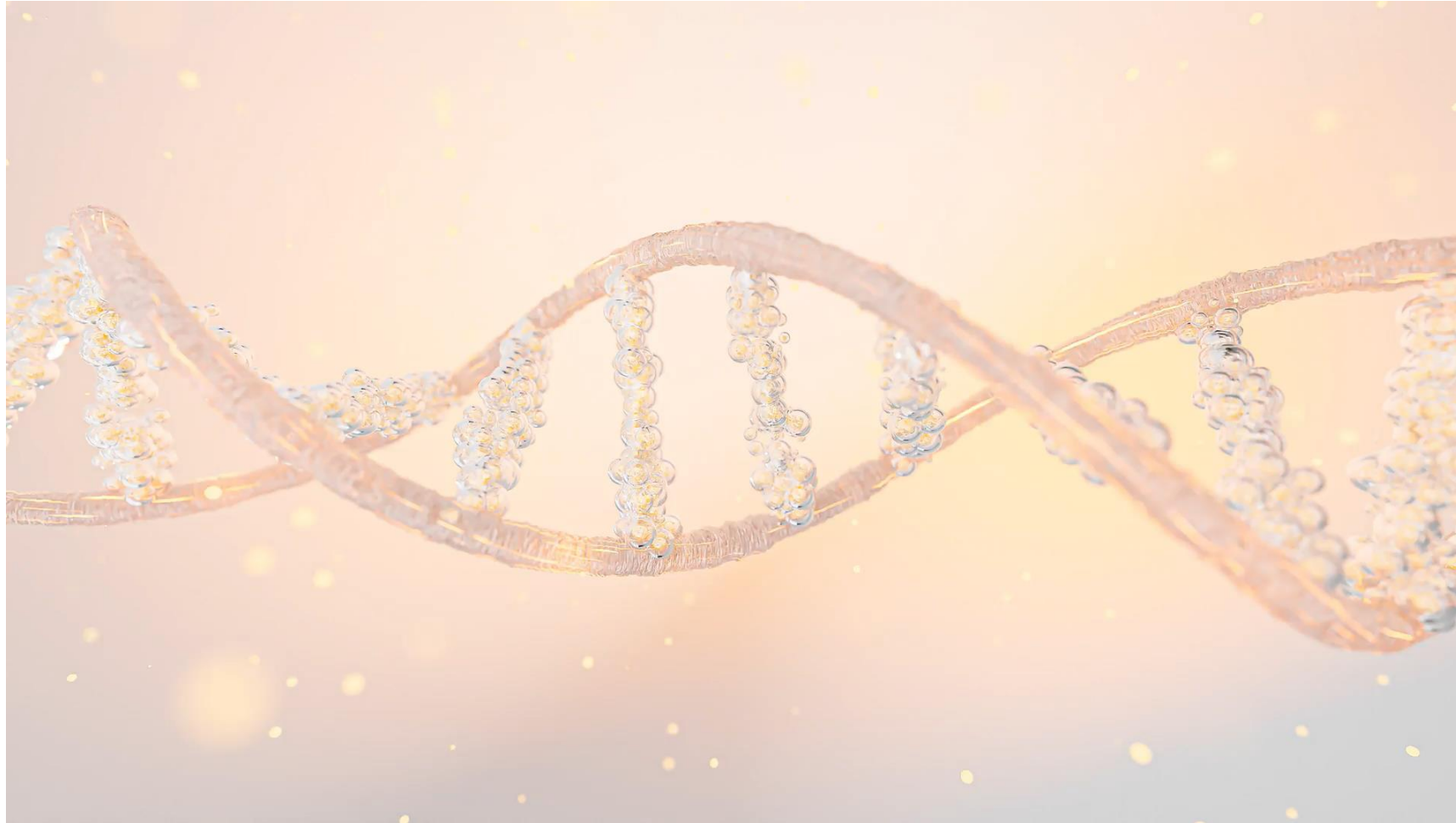


Food Allergy



Hearing Health

Cancer



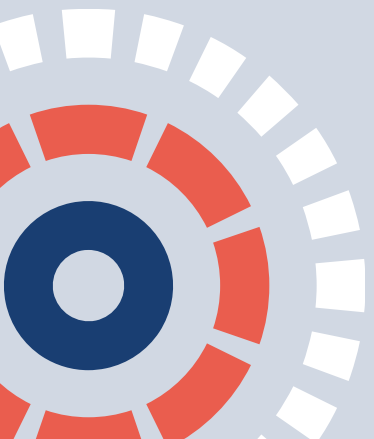
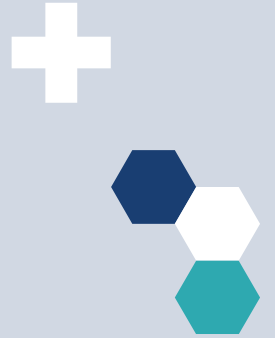
Women's Health



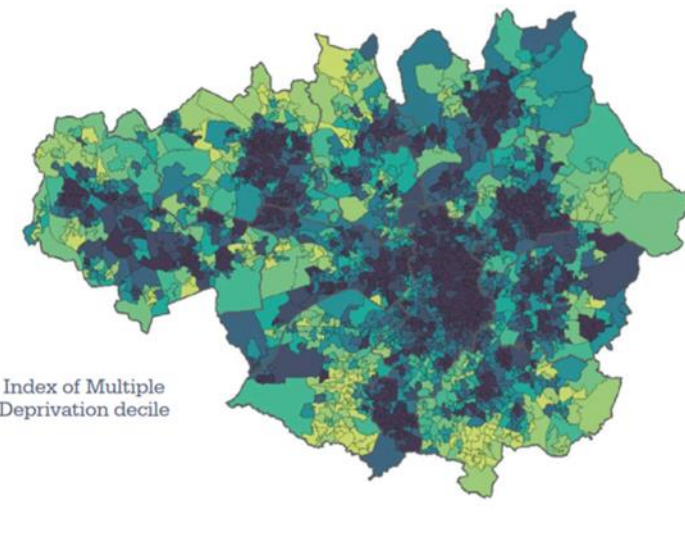
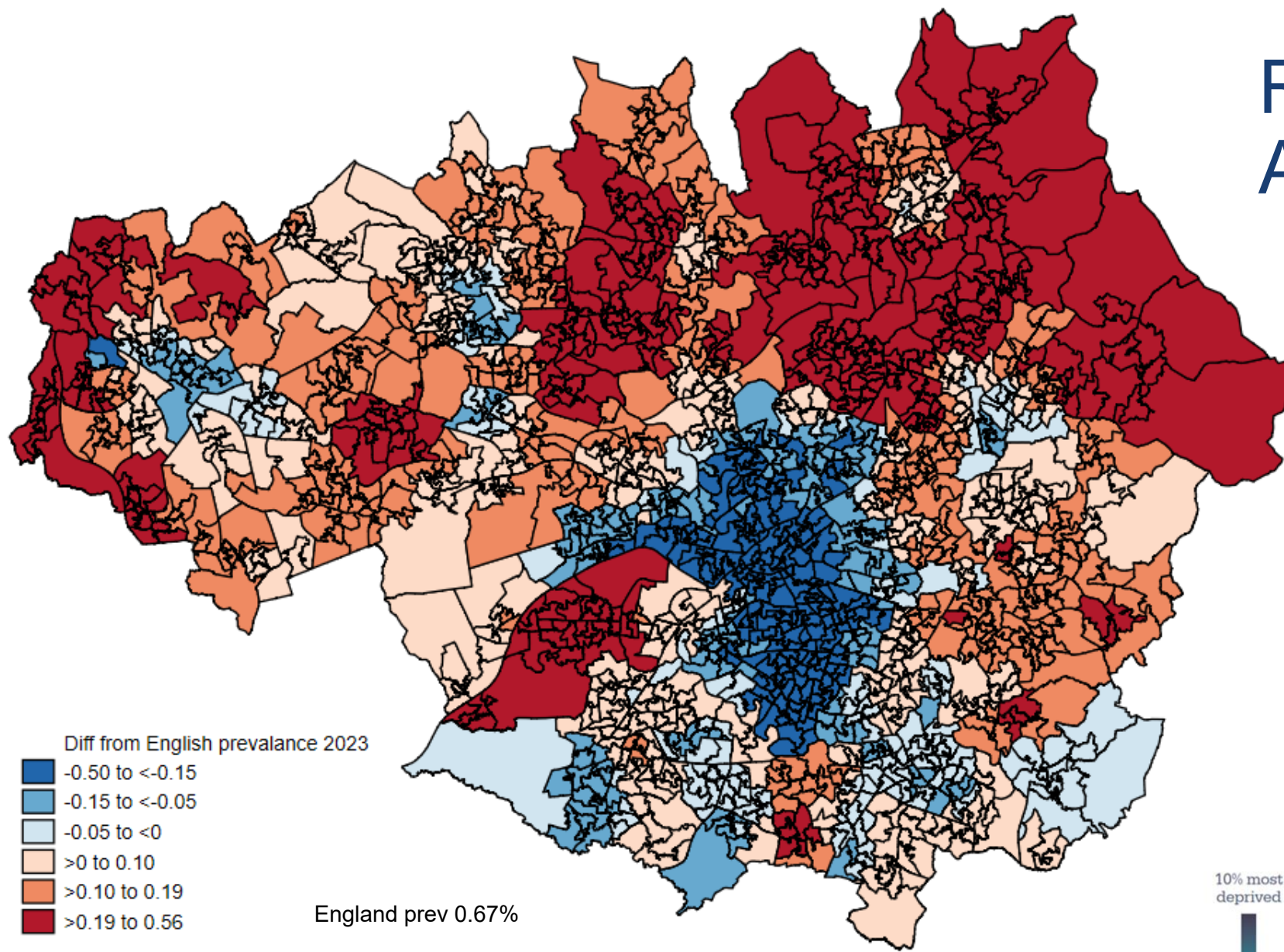
Children's Health

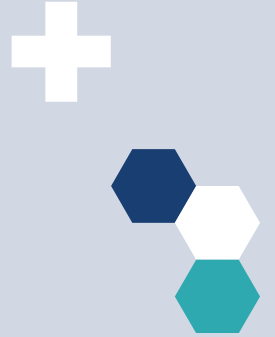


Identifying Need



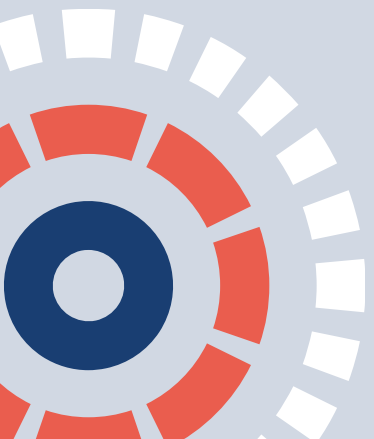
Rheumatoid Arthritis (2023)





NIHR Research Inclusive Plans

- Recent updates
- Dr Anna Coleman
- Dr Abin Thomas
- 28.10.2025



Overview of the presentation



NIHR announcement about inclusive research 2024 and the ten steps for embedding inclusion into research and new NIHR grant applications



Updates to NIHR guidance in Autumn 2025 and the HRA consultation



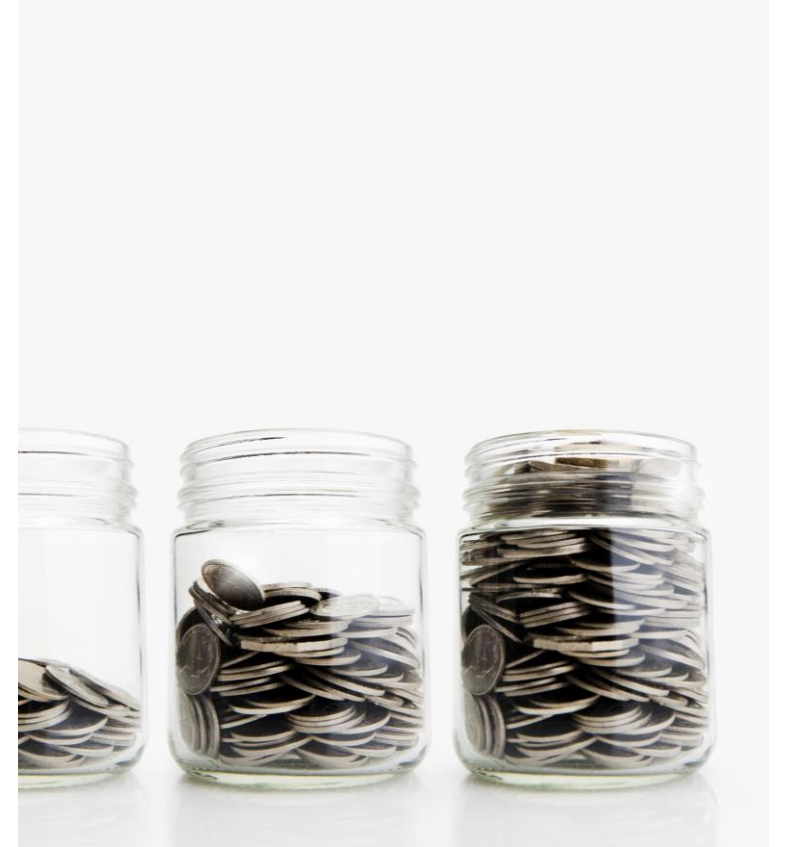
Resources on inclusive research methods

NIHR announcement on Inclusive Research (IR) funding- Autumn 2024

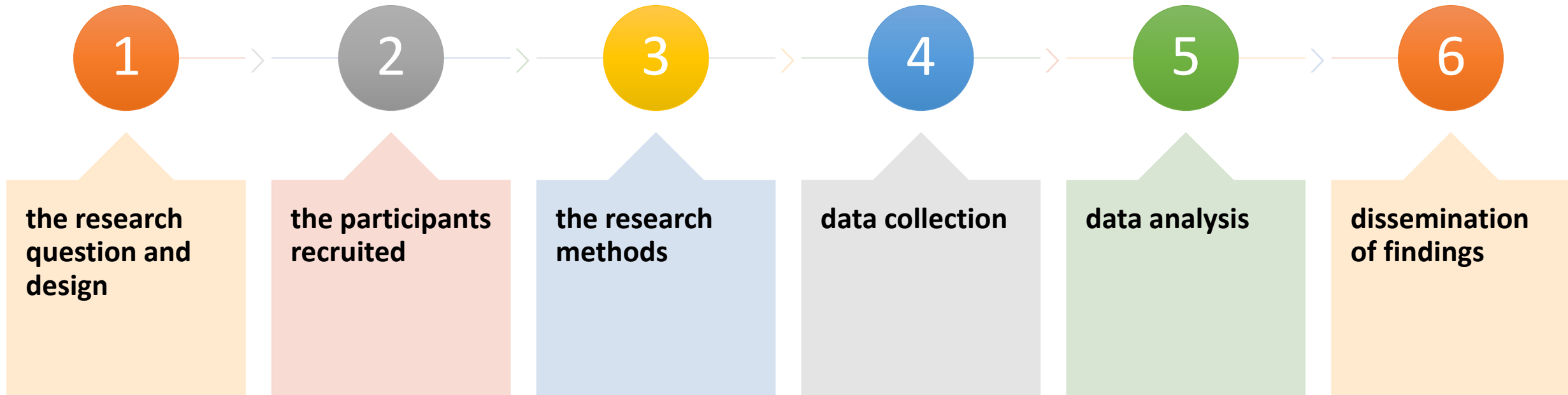


From Nov 27th 2024, applicants for NIHR domestic programme awards needed to ensure inclusion was embedded into the whole research lifecycle.

Reasonable and justified costs will be provided by NIHR to enable researchers to conduct inclusive research.



Inclusion in all stages of the research cycle



Ten steps to embed inclusion into research and new NIHR grant applications

1

- Substantiate your research inclusion statements

2

- Ensure you know which inequalities are relevant to your field

3

- Include under-served areas in research

4

- Justify your research sample

5

- Specify which demographic data you will collect and how you plan to use it?

Ten steps (cont.)

6

- Budget for inclusion

7

- Consider how methodological innovation could overcome exclusionary aspects of conventional methods

8

- Demonstrate how research can be shaped by diverse and inclusive Patient and Public Involvement and Engagement (PPIE)

9

- Plan inclusive and impactful approaches to knowledge mobilisation

10

- Use resources available

Updates to NIHR guidance in Autumn 2025



In August 2025, NIHR signed a joint statement with other major UK funders (one of 42) which commits them to '[greater inclusion of older adults in health and care research](#)' (NIHR 11/8/25).



The joint statement sets out a shared commitment from those participating to:

actively support the inclusion of older adults in research;

challenge unjustified exclusion, particularly where older adults have complex health conditions;

and ensure that research is designed with equity in mind and better reflects the diversity of the UK.

Updates to NIHR guidance in Autumn 2025

From 10 November 2025, new NIHR requirements concerning the consideration of sex and gender in research (NIHR, 26/9/25) will apply to all UK domestic programmes, with infrastructure and global health awards to follow.

Under these updated conditions, funding applications must include a clear and evidence-based justification for how sex, gender, or both have been addressed within the research design.

NIHR update

It emphasises that sex and gender are critical determinants in shaping individuals' and populations' experiences of health, illness, and social care, as well as influencing broader health outcomes (wider determinants).

According to NIHR, these dimensions affect:

*The types of medical conditions individuals develop;

*The symptoms they experience;

*The treatments and quality of care they receive;

*Disease progression and overall health outcomes;

*Recognition and response to social care needs;

*The extent and nature of health inequalities.

NIHR update (cont.)

By establishing this as a condition of funding, the NIHR aims to:

- **Enhance research quality:** Promote rigorous, reproducible studies that reflect and serve the diversity of the UK population.
- **Tackle health inequalities:** Address critical knowledge gaps in the health of women, transgender, and non-binary people to improve outcomes across all groups.
- **Drive cultural change:** Encourage researchers to routinely integrate sex and gender considerations into study design, analysis, and dissemination.

NIHR update (cont.)

- Applicants will be expected to give details of their proposed “characteristics specific to sex or one gender” in their research and need to provide justification of their choices in their proposal. Examples can be seen in the detailed guidance. Full details of NIHR’s expectations are provided in the updated Inclusive research funding application guidance (NIHR 27/11/24, updated Sept 2025).

Health Research Authority update: Monitoring inclusive research

- The **Health Research Authority** (HRA) undertook an informal consultation in 2024: [HRA Now - Help shape our new inclusion and diversity guidance](#).
- Now published a [second draft of the questions and guidance](#), which they are trialling with researchers and sponsors (HRA 2025). The [pilot](#) is now open (autumn 2025) and will run for approximately 6 months before closing towards the end of 2025.
- HRA suggest creating a ‘Inclusivity and diversity plan’ (this could be considered alongside the NIHR 10 steps to inclusivity) as this will support the research team to consider how to do as much as possible to include all those who may be impacted by the proposed research, particularly those from under-served groups.
- The plans are not mandatory but can be a helpful addition to an IRAS ethics application.

Useful resources and how to contact the IRM Team

Inclusivity website (resources/links for IRM EDI PPIE): <https://www.manchesterbrc.nihr.ac.uk/brc-staff-information/research-inclusion-resources/>

Monthly drop in sessions for Inclusive research methods support - second Tuesday of the month at 2-3pm using MS Teams <https://tinyurl.com/5e5wj9ux> You can book with team beforehand (email - IROB@manchester.ac.uk) to guarantee a slot or just turn up on the day.

The IR Team is here to help. Whether you have questions, feedback, are interested in advice for a specific project, bids or Fellowships or longer-term project support / collaboration (we can be costed in as part of the team).

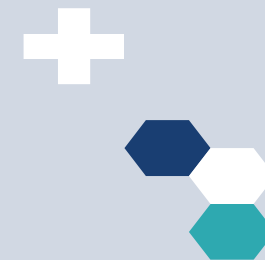
Please get in touch by completing the contact form below.

[Inclusive Research Methods Contact Form](#) Or email your contact within the IRM Team (by Cluster for BRC or by NIHR programme)

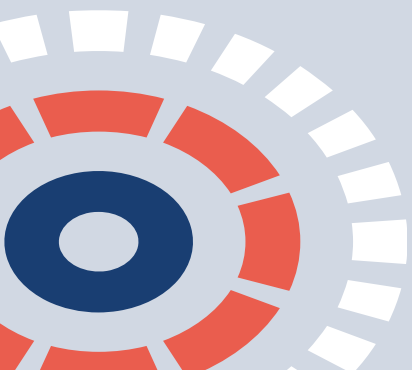
Other support

Research Support Service - <https://www.nihr.ac.uk/support-and-services/research-support-service>

NIHR EDI Toolkit - <https://www.rssleicesterresources.org.uk/edi-toolkit>



Inclusive Research Maturity Matrix



IR Maturity Matrix

- NIHR BRC/CRF Inclusive Research Strategy
<https://www.manchesterbrc.nihr.ac.uk/wp-content/uploads/2025/08/Manchester-BRC-and-CRF-Inclusive-Research-Strategy-2022-27.pdf>
- NIHR Conditions of Funding – 10 steps
<https://www.manchesterbrc.nihr.ac.uk/wp-content/uploads/2025/03/NIHR-Inclusive-Research-new-conditions-of-funding-report.pdf>
- Evidence base
- Training and capacity building
- Monitor year on year changes at individual and programme level
- Landscape is changing
- Resources – signposting and prioritisation

Maturity

- On Qualtrics to collect longitudinal data
- Asking individuals to rate their level of maturity

- *Four-point maturity scale:*

**1. Not Addressed → 2. Partially Addressed →
3. Adequately Addressed → 4. Exemplary**

Research Inclusion Statements

- *Project-level*: “Does your project have an inclusion plan?”
- *Programme-level*: “Does the BRC have an explicit, resourced inclusion strategy, embedded in its governance, funding calls, and communications?”

Identifying Relevant Inequalities

- *Project-level*: “Have you reviewed inequalities in your research field?”
- *Programme-level*: “Does the BRC systematically review health inequalities across its research themes and ensure these inform strategic priorities and investment?”

Inclusion of Under-Served Areas

- *Project-level*: “Have you justified your study population/location?”
- *Programme-level*: “Does the BRC prioritise research in areas and populations with the greatest health need, and does this shape site selection, partnerships, and theme development?”

Justification of Sample

- *Project-level*: “Have you justified your sampling approach?”
- *Programme-level*: “Does the BRC have policies, expectations, or infrastructure (e.g. inclusion frameworks, recruitment support from CRF) that ensure equitable recruitment across its portfolio?”

Collection and Use of Demographic Data

- *Project-level*: “What data will you collect and how will it be used?”
- *Programme-level*: “Does the BRC have standardised systems, tools, and support for demographic data collection and analysis across projects? Is there a commitment to intersectional analysis in programme-wide outputs?”

Budget for Inclusion

- *Project-level*: “Have you budgeted for inclusion costs?”
- *Programme-level*: “Does the BRC ring-fence or require inclusion budgets in its funding applications, and does it allocate central funds for inclusive infrastructure and training?”

Methodological Innovation

- *Project-level*: “Are your methods inclusive?”
- *Programme-level*: “Does the BRC promote, resource, and showcase inclusive and innovative methods (e.g. participatory, creative, community-based approaches) across its themes?”

Diverse Patient and Public Involvement and Engagement (PPIE)

- *Project-level*: “Is your PPIE group diverse?”
- *Programme-level*: “Does the BRC have a central strategy for ensuring diverse, equitable PPIE across its portfolio? Are partnerships with organisations like Vocal embedded at the governance level?”

Inclusive Knowledge Mobilisation

- *Project-level*: “Have you considered diverse audiences in dissemination?”
- *Programme-level*: “Does the BRC ensure programme-wide dissemination reaches diverse communities, policymakers, and practitioners? Are outputs accessible (language, format, channels) and co-produced with communities?”

Use of Available Resources

- *Project-level*: “Have you used EDI resources/toolkits?”
- *Programme-level*: “Does the BRC systematically integrate EDI frameworks (INCLUDE, HEAT, etc.) into governance, guidance for researchers, and training? Are these resources visible, mandated, and evaluated?”

Useful Links

- [IR Maturity Matrix Qualtrics link](#) – we are asking Cluster and Theme leads to encourage participation and encourage annual completion and researchers to email us via Qualtrics to help evaluate and improve the MM
- [Monthly drop in sessions](#) - These take place on the second Tuesday of the month: Next session is 13/1/26 at 2-3pm using MS Teams. **You can book a slot or just turn up.**
- [IRM Team contact form](#)
- Please find all our resources and case studies on our website
<https://www.manchesterbrc.nihr.ac.uk/brc-staff-information/research-inclusion-resources/>
- IR Training Session – 26.1.26 online 10.00-12.00 Register [here](#)
- 14th International Festival of Public Health (Theme RI) – abstract and registration [here](#)

Thank you

