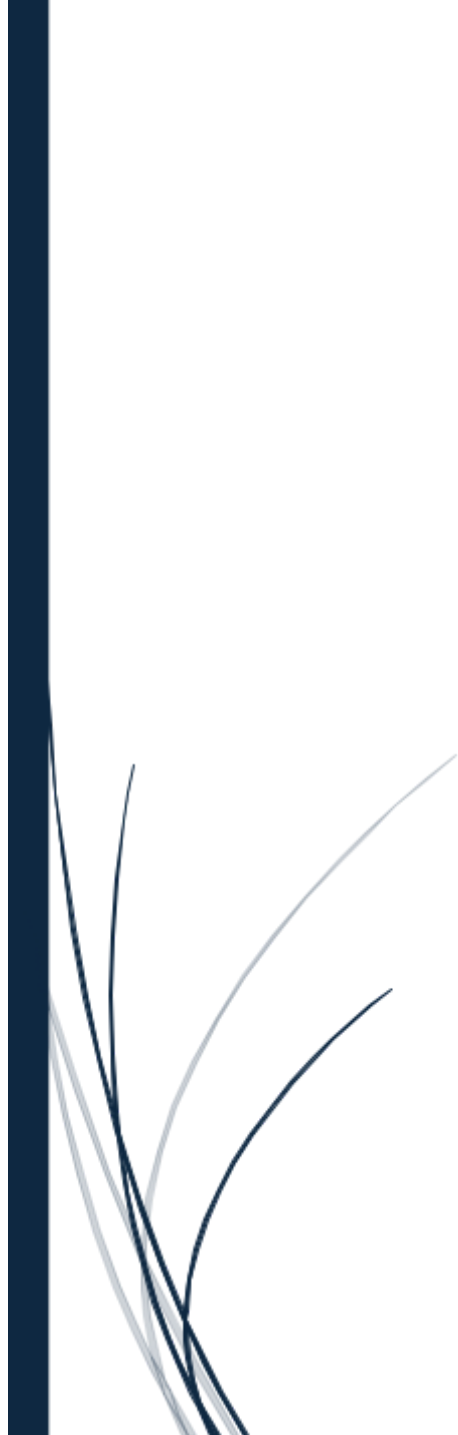




Individual Report

Module Name: Digital skills and Research Methods

Module Code: LCHS 4007

Student Name: Mojisola Abatti

Student ID: 2515877

Lecturers Name: Dr Sadeque Shaikh

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Introduction

My chosen topic for this assignment is Health Inequalities. According to the McCartney et al (2019) is believe to be the unequal distribution of wealth, resources, opportunities and outcomes among individuals in a society and this is impacted by factors such as income generation, gender, ethnicity, education and status of health. The report will cover the extent and impact of inequality in the UK.

Task 1 – Selection of a Research Topic

1.1 The Issue and Why It Matters

The topic inequality is a significant issue in healthcare due to the fact that it leads to avoidable and differences in outcomes of healthcare, accessing services and the quality of care that is given. The differences are connected to economic conditions and social factors, hence inequality is major concern for the NHS .

1.2 Personal Reflection – Why I Chose This Topic

I Choose this topic because it is relevant to mental health practice. Individuals that experience mental health issues are disproportionately affected often by social inequalities such as social isolation, unemployment and poverty. The issues can have impact on mental health condition thus barriers to accessing support. As stated by Kings Fund (2023) health inequalities are connected to social determinants that are wider hence this highlights the need for and holistic approach in care.

Task 2 – Evaluating Information Sources

2.1 Source 1

Guidance: Provide the full Harvard reference. Summarise the source, explain why it is credible and how it supports your topic.

The King's Fund (2023)

What are health inequalities? Available at: <https://www.kingsfund.org.uk> . The source is a website that is updated regularly and the recent update was in 2025 and it shows the current UK health data and the developments of policy for inequality. The source King Fund is a UK health think tank that has a long history that influence policy and studies in health care.

The use of the CRRAP test, The King Fund (2023) is been reported as a credible, appropriate and a highly relevant source. It has supported the topic of inequality thus providing evidence based explanations, data that is current, and analysis of expert, hence it is a suitable for writing academically.

2.2 Source 2

Guidance: Repeat the same process. Choose a source that provides a different angle or type of evidence.

National Institute for Health and Care Excellence (2023)
NICE and health inequalities. Available at: <https://www.nice.org.uk> accessed 06/04/2025

In comparison to King Fund which explain and analysis inequality, NICE focus is on action that is practical and implementation through guidelines that is clinical and recommendation of policies. NICE (2023) sees inequalities as differences in health and they are systematic, partial and avoidable. Furthermore, NICE went further by the emphasising on the reduction of inequality which is a core principle in health care delivery. Professional in health care should use evidence-based guidelines in reducing disparities.

Using the CRAAP Evaluation the website of NICE is updated continuously to reflect evidence that is current, the sources addresses directly what causes inequality such as access to care, housing and deprivation .

2.3 Source 3

The CQC is a government site that publishes reports that I regular and annual for state of care reviews and this is updated frequently reflecting current health conditions in social care services. The recent report (2022-2024) reported findings on access to inequalities , experience and care outcomes. With this the source is current and relevant to issues that are ongoing in the UK. The focus on CQC is on how inequality affects access to services of health care, the quality of care received, and the experiences of vulnerable groups, such as the people with mental health and ethnic minority people.

The CQC is the regulator of health and social care in England and it is an independent body that is responsible for inspecting and monitoring services such as the hospitals, care homes and mental services. For the fact is a government established body that regulates the sector , its findings highly authoritative and credible considered. Is report are based on inspections of health care services, collection of data, observations that is direct and performance ratings.

While CQC is reliable , it focus is on regulation , inspection thus it may explore wider issues in inequality in as much depth sources like King Fund

2.4 Gaps in Current Research

Different studies such as Lowther-Payne et al., (2023) have pinpointed inequalities but there are still understanding that is limited on how certain set of people does not have access effectively. A systematic review by them found out that despite different policies in improving access there is still lack evidence that is comprehensive on which groups are under served and the measuring of access.

Task 3 – Research Methodologies

3.1 Definitions and Examples

Quantitative study is about the gathering and analysing of data that are numerical in identifying patterns, trends and relationship. Statistical methods are used which are often structured and objective.

An example is the study that measures number of patients with depression that attends mental health services over a certain period analysing if treatment reduce symptoms with the use of rating scales.

Qualitative Investigation: This explores the experiences of people feelings and their perspective with the use of numeric data such as interviews and open-ended questions. An example is the use interview with patients receiving support from mental health workers in understanding experience of recovery and support services that is given to them.

3.2 Chosen Methodology and Justification

Both Quantitative and Qualitative methods will be used for the study and it is known as mixed-methods. Mixed methods combine both quantitative and qualitative in providing an approach that is comprehensive.

A mixed-methods tactic is the most suitable procedure for investigating inequality due to the fact it reports both the scale and the experience that is live of the issue. A holistic, reliable and practical understanding of the issue is provided; thus it makes it to be highly current and informative of policies of health care and how to improve service. for informing healthcare policy and improving services.

Task 4 – Data Collection

4.1 Primary vs Secondary Data

Primary data is the original data that is collected by investigators original in the specific purpose of study. These data have not been published by anyone as it is raw from the field.

Secondary data is about the data that has been collected by an investigator initially and they have been analysed, and published by an investigator or organisation in a previous study.

4.2 Chosen Data Type and Justification.

A mixed method chosen is justified for the study of inequality in healthcare for the fact that it gives an approach that is comprehensive and wider understanding of the issue at stake as the issues cannot be explained fully by the use of method.

4.3 Advantages and Challenges

A mixed-methods approach has numerous benefits, especially when investigating intricate topics like health inequality. A primary advantage is that it delivers a holistic insight by merging quantitative and qualitative information. Quantitative techniques produce numerical data that highlight patterns, trends, and correlations, whereas qualitative techniques delve into people's experiences, views, and social environments. This integration enables researchers to achieve both a wide-ranging and in-depth understanding.

Triangulation, which compares results from many approaches to increase the validity and reliability of the conclusions, is another benefit. Confidence in the results rises if similar conclusions are supported by both forms of evidence. Researchers can also investigate unexpected outcomes using mixed approaches; for instance, statistical results can be further explained through observations or interviews.

Conclusion

In conclusion, this research has examined the idea of healthcare inequality, emphasising that it refers to unjust and preventable disparities in health outcomes, service accessibility, and care quality. It has looked at how important the subject is, especially when it comes to mental health, where socioeconomic variables like poverty, loneliness, and restricted access to care can have a big impact on people's wellness. Support workers' role has also been examined, highlighting their significance in assisting in the reduction of disparities by fostering recovery, independence, and access.

The use of a mixed-methods approach was also covered in the paper, demonstrating how integrating quantitative and qualitative data yields a more thorough knowledge of inequality. Important resources including The King's Fund, the National Institute for Health and Care Excellence, and the Care Quality Commission were also assessed, demonstrating their reliability and applicability in comprehending and resolving inequity.

Overall, because disparities continue to impact vulnerable people and put strain on services, this problem is still very relevant in the healthcare industry. Inequality is a crucial topic for continuing research and professional practice since addressing these problems is necessary to guarantee equitable, efficient, and person-centred care.

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The state of health care and adult social care in England. Available at:

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Designing and conducting mixed methods research. Sage Publications.

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