



 <p>GIG CYMRU NHS WALES Iechyd Cyhoeddus Cymru Public Health Wales</p>	<p>Name of Meeting Knowledge, Research and Information Committee</p>			
	<p>Date of Meeting 9 December 2025</p>			
	<p>Agenda item: 2.2</p>			
<h2>Our Approach to Health Inequalities</h2>				
<p>Executive lead:</p>		<p>Sumina Azam, National Director of Policy and International Health</p>		
<p>Author:</p>		<p>Cerys Preece, Principal Public Health Practitioner Jo Peden, Consultant in Public Health</p>		
<p>Approval/Scrutiny route:</p>		<p>Reviewed by Sumina Azam, National Director of Policy and International Health</p>		
<p>Purpose</p>				
<p>The purpose of the report is to provide an update on the progress of the Our Approach to Health Inequalities Programme, following a 'deep dive' in March 2025.</p>				
<p>Recommendation:</p>				
<p>APPROVE <input type="checkbox"/></p>	<p>CONSIDER <input type="checkbox"/></p>	<p>RECOMMEND <input type="checkbox"/></p>	<p>ADOPT <input type="checkbox"/></p>	<p>ASSURANCE <input checked="" type="checkbox"/></p>
<p>The Committee is asked to:</p> <ul style="list-style-type: none"> • Take assurance on progress to date and plans for future of the Our Approach to Health Inequalities programme 				



Link to Public Health Wales [Strategic Plan](#)

Public Health Wales has an agreed strategic plan, which has identified seven strategic priorities and well-being objectives.

This report contributes to the following:

Strategic Priority/Well-being Objective	All Strategic Priorities/Well-being Objectives
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Summary impact analysis

Equality and Health Impact Assessment	No Equality and Health Impact Assessment has been undertaken as no decision is required.
Risk and Assurance	Risks are being managed in accordance with the Board Assurance Framework.
Health and Social Care (Quality and Engagement) (Wales) Act	This report supports the implementation of the Health and Social Care (Quality and Engagement) (Wales) Act by demonstrating a transparent approach to delivering improvements that address health inequalities, in line with the Duty of Quality.
Financial implications	Financial implications are being considered as part of this work programme.
People implications	People implications are being considered as part of this work programme.



1. Purpose / situation

This paper aims to provide assurance on the progress made by the Our Approach to Health Inequalities programme. A deep dive was presented to the Committee in [March 2025](#) and this paper provides an update, including next steps.

2. Background

Public Health Wales Long Term Strategy commits us to reducing health inequalities. Our Approach to Health Inequalities is a cross-organisational programme to address health inequalities and ensure that tackling health inequalities is embedded in the six strategic priorities of the long-term strategy.

The Our Approach to Health Inequalities Steering Group was established in June 2023 and seeks to ensure that addressing health inequalities is embedded in all our work. Work of the group to date has included the establishment of two subgroups to accelerate action in priority areas: Data, Analysis and Evaluation Subgroup and a Task and Finish group to develop a Health Inequalities Framework. The Programme provides bi-monthly performance reporting updates to the Board.

The role of the Steering Group is to:

- Focus on work that is ‘once for Public Health Wales’
- Co-ordinate and help align and enable sharing – preventing duplication
- Identify gaps in what we are doing
- Support work with partners – including Local Authorities and the 3rd sector
- Be the custodian of the health inequalities narrative
- Sense check actions against route maps and the IMPT

3. Progress Update

This paper provides an update on key areas of organisational work on health inequalities since March 2025 and plans for 2026/2027.

3.1. Our Approach to Health Inequalities Framework

A framework, with supporting case studies has been developed with input from staff across Public Health Wales and is aimed at all staff, but in particular those involved in planning, strategy and decision making. A health equity narrative has also been developed along with a supplementary document which offers more detailed information, tools and resources. A user testing workshop took place with staff from across Public Health Wales, Llais, our Behavioural Science Unit and the Public Health Wales Engagement team. The framework is included in IMTP planning documentation ahead of a more formal launch.



During 2026/27, we will develop a communications and engagement plan to ensure cross organisational engagement on our shared narrative and framework on health inequalities, to continue to embed our work, strengthen coherence and support delivery of the Long Term Strategy.

3.2. Data, Analysis and Evaluation subgroup

The Data, Analysis and Evaluation subgroup aims to improve how data, evidence, and evaluation are used across Public Health Wales to understand, monitor, and reduce health inequalities. The group has effectively supported sharing of learning and best practice between directorates.

Through this group, we have introduced an inequalities section in the Board's Performance and Value reports. This provides updates and assurance on Public Health Wales activity on health inequalities, highlights the strategic context of health inequalities in Wales, and draws out health inequalities messages embedded in Public Health Wales' outputs, such as dashboard updates. Topics reported to the Board to date include primary care, early years, and screening, alongside data on healthy life expectancy, premature mortality, cancer, and risk factors for chronic conditions.

The IMTP measurement system has now been established, and indicators are being reported on regularly, with a cross-cutting focus on inequalities. Wherever possible, the strategic priority outcome indicators are disaggregated by deprivation. Further indicators and a programme of policy modelling and evaluation is being developed as part of the measurement system, which will include emphasis on health inequalities.

An analysis plan is being developed to explore the widening gap in healthy life expectancy between the most and least deprived areas in Wales (currently 20 years for women and 16 years for men). This work will continue through 2026/27 and will inform IMTP planning and other areas of work, such as policy advocacy.

3.3. Primary Care

As part of Health Inequalities and Inclusion Health programme in Primary Care Division we have developed:

- Health [Inequalities and Inclusion Health](#) webpages to hold key resources.
- Planning Resources – [Health Equity and Inclusion Health Toolkit for Primary Care in Wales - Primary Care One](#) to support clusters and RPBs in the development of their plans.
- The Inclusion Health Blueprint for services; the Blueprint was officially launched by the Minister at an Inclusion Health Summit held with the third sector.
- Data dashboards for health inequalities and inclusion health:
 - Inequalities dashboard for primary care, in partnership with NHS Wales Performance and Improvement.
 - Inclusion health infographics and evidence summaries.



- Case studies of inclusion health services in Wales.
- Participation in Dragon's Heart Institute programme to spread and scale Population Health Management.

Education and training activities include:

- A directory of education and training for health professionals working with inclusion health populations.
- Delivery of training to over 200 GP trainees.
- Successfully piloting the Teg i Bawb / Fair for All training programme for non-clinical staff in GP practices to raise awareness of the needs of inclusion health groups.
- Developing a multidisciplinary training and competency framework for Health inclusion and Prison Health.
- Contributed to the dialogue on health inequality and inclusion through presentations at national and international events, workshops at the Welsh Public Health Conference, conducting six webinars focused on health inequality and inclusion health and speaking at the King's Fund Inequality event and RCGP Equality, Diversity, and Inclusion (EDI) conference.
- Established two networks for health inclusion - a Public Health Network and a Nurse's Network.
- Call to Action co-developed with HMPPS for Health and Justice Continuity of Healthcare from community to prison.

Looking ahead we will:

- Launch our Action Plan for Fairer Primary Care, Teg i Bawb / Fair for All in December, marking a significant milestone in our commitment to equity in healthcare. This will be followed by an evaluation in 2026/27 to ensure its effectiveness and relevance across services.
- Hold our second Inclusion Health Summit in February 2026, continuing our engagement with stakeholders across sectors.
- Roll-out and implement the Action Plan, for Fairer Primary Care alongside the delivery of Population Health Management (PHM) training, in collaboration with the King's Fund, to build leadership capacity within NHS Wales.
- Progress implementation of the multiprofessional training and competency framework across all inclusion health settings in Wales.
- In partnership with Policy and International Health Directorate, we are piloting and developing women's health services using a population health approach, and will be publishing a 'How to' guide and best practice framework for engaging communities (particularly seldom heard voices) in service planning.
- Work with Communicable Disease Health Inclusion Programme and Policy and International Health Directorate to establish a national Health and Justice group. We will also scope implementation of the national call to action aimed at improving continuity of healthcare for individuals in contact with the criminal justice system.
- Foster international exchange on Inclusion Health to share learning and strengthen global collaboration.



- Widen access to our data dashboards, which are currently only accessible to NHS staff. We will support work underway in Public Health Wales to ensure the voices of those with lived experience are meaningfully integrated into decision-making and service design.

3.4. Gender Equity and the Well-being Economy Webinar

This webinar explored the strategic intersection of Gender Equity and the Well-being Economy through a virtual roundtable format. Opened by the Minister for Mental Health and Well-being, Sarah Murphy MS, the session marked a key milestone in delivering on the Memorandum of Understanding between Welsh Government and the WHO Regional Office for Europe. It also directly supported the ambitions of The Women's Health Plan for Wales, reinforcing the Government's commitment to embedding gender equity within public health and economic policy. The webinar convened high-level stakeholders from across leading Well-being Economy nations, representing public health, economics, and policy sectors. The discussion focused on identifying actionable levers for change, with potential areas of exploration including: gender pay gap and gender budgeting; gender-transformative policymaking; workforce and career progression through a gender lens; and gender-based violence.

3.5. Health Protection Inequalities Programme (HPIP)

Since March 2025, Health Protection Inequalities Programme and the component Health Protection and Emergency Preparedness, Resilience and Response teams have:

- Delivered internal best practice guide training to over 100 Health Protection Division staff, enhancing consistency and equity in operational practice.
- Contributed to the Public Health Wales Pandemic Preparedness Plan and Exercise Pegasus, ensuring health inequalities were embedded in planning and response strategies.
- Introduced a dedicated session on health inequalities within the Health Protection Orientation Programme, ensuring all new Health Protection Division starters receive foundational training on equity.

The Communicable Disease Surveillance Centre (CDSC):

- Hosted the Science in Health Protection Seminar 2025: Bridging the Gap – Tackling Health Inequalities for Health Protection Resilience. This was attended by over 150 participants, with Nicola Evans, Head of Health Inequalities and Healthy Communities (Welsh Government), as plenary speaker.
- Are nearing completion of an inequalities audit framework to assess CDSC's ability to evidence health inequalities and determine the utility of this data for decision-making.

The Vaccine Preventable Disease Programme (VPDP) initiated work to:

- Explore attitudes and awareness of vaccines among the GBMSM population.



- Improve understanding of factors associated with low vaccination uptake in pregnancy.
- Gain insight and understanding of barriers and facilitators of vaccination uptake in highly deprived areas.

Looking forward to 2026/27, efforts will focus on:

- Raising awareness and agreeing next steps on data access challenges identified across Health Protection Screening Services, with a focus on enabling equitable decision-making.
- Conducting an annual review of Health Protection Inequalities Programme and Health Protection/Emergency Preparedness Resilience and Response team activities to support continuous improvement.
- The Emergency Preparedness Resilience and Response team will lead Local Resilience Forum workshops to explore how inequalities can be better integrated into multi-agency emergency response decision-making.
- Undertaking a qualitative study on reducing substance-use related harm among people in prison and on their release by the Communicable Disease Inclusion Health Programme team.

3.6. Screening Division

The Screening Division is working towards achieving the vision that everyone eligible for screening has equitable access and opportunity to take up their screening offer using reliable information to make a personal informed choice. This is delivered through the Screening Equity Plan, in addition to focused equity projects within programmes. The Screening Equity Strategy is being refreshed, and a series of workshops are planned in Q3 and Q4 to gather feedback on the existing strategy and insights on gaps or new priorities from a range of stakeholders, including third sectors partners.

Actions to date to deliver the Equity Plan include:

- Accessible information resources, for example Easy Read and BSL; launch of BSL bowel screening video in Deaf Awareness Week; and launch of Breast Test Wales 'What to expect' pathway video to reduce anxiety and fear of attending screening centres particularly for people with learning disabilities, people who are neurodivergent and for first time attendees.
- Continued growth of Screening Engagement Network for community champions supported by regular communications through 'Screening Matters'.
- Continued delivery of community screening awareness training to provide knowledge and support for community workers to include screening as part of conversations.
- Development of Primary Care Sharepoint pages to support the information available for Primary Care colleagues as partners in delivery of screening programmes.



- Establishment of cervical self-sampling project team to develop an implementation plan for self-sampling for under-screened women and people with a cervix within 2026.
- Roll-out of National Health Protection Support Team intervention to Diabetic Eye Screening Wales (DESW) participants. This intervention provides a telephone call to non-responders to their first invitation to screening and will extend to non-responders in the 18-40 year old group as group with lowest uptake of screening.

3.7. Research and Evaluation Strategy

As part of the implementation of the Research and Evaluation Strategy we have ensured that:

- Health inequalities are reflected in the Public Health Wales annual areas of research interest, to influence researchers and funders.
- Research partnerships focus on inequalities e.g. SAIL Hwb – health data linked to census data providing population demographics and domains of equity.

Research within Public Health Wales with a specific focus on health inequalities includes:

- Reducing inequalities in school food environments (RISE), supporting provision, uptake and consumption of free school meals in primary schools.
- Children and Young Peoples Mental health and Wellbeing, using SAIL and qualitative insights.
- Digital health - consolidating a digital exclusion typology and stakeholder engagement exercise to inform future evaluation of initiatives to tackle digital exclusion.

Public Health Wales has been designated as a World Health Organisation Collaborating Centre on Digital Health Equity - this collaboration will be of significant benefit to Wales and will play a key role in shaping WHO's focus to ensure equity in digital health transformation across the regional and global systems.

Since March 2025, our evaluation programme has maintained a strong focus on addressing health inequalities across a wide range of public health initiatives. Evaluations have examined differences in access, experience, and outcomes across factors such as age, sex, deprivation, ethnicity, disability, and inclusion health. Key highlights include:

- The All-Wales Diabetes Prevention Programme, which reached older adults, deprived communities, and women.
- Tackling Diabetes Together, which identified cultural and religious barriers to dietary advice.
- Hapus National Conversation, which successfully engaged groups less likely to access mental wellbeing support.
- Prehab 2 Rehab study, which showed positive rehabilitation outcomes but identified higher postoperative risks among older patients.
- Warm Wales, addressing fuel poverty in low-income and rural populations.



- Every Child Health Information Resource, which found barriers among families with learning difficulties and non-English speakers.

Other evaluations have explored inequalities in areas such as school health, vaccine communications, fuel poverty, sexual health, digital health access, contraceptive access after pregnancy, respiratory vaccine campaigns, and inclusion within sexual health services.

Looking ahead to 2026/27, we will continue prioritising research and evaluation that examine equity of access and outcomes. Planned work includes the end-point evaluation of the Hapus National Conversation, expanded assessments of diabetes management interventions, and further exploration of inclusion health in sexual health and school-based programmes. Through this approach, our evaluation activity will continue to strengthen understanding of programme effectiveness while supporting tangible action to reduce health inequalities across Wales.

4. Recommendation

The Committee is asked to:

- **Take assurance** on progress to date and plans for future of the Our Approach to Health Inequalities programme