Questions for HWB to consider alongside papers:

What dimensions of inequality relate to this item and what are the intersectional considerations?

Were these highlighted in the presentation? Do we have defined plans to address these inequalities?

Are there any ways in which this work might unintentionally widen inequalities?

How do the focus areas of the HWB strategy (mental health, financial security, social connection) relate to this item?

What actions could be taken to maximise the positive impacts and minimise the negative impacts on health inequalities?

Definitions:

Health inequality: avoidable or unjust differences in health status between population groups.

Dimensions of inequality: different ways we define these groups e.g. geography, equality dimensions (age, gender, ethnicity, sexuality, disability etc), additional needs e.g. care leavers, carers).

Intersectionality: how different dimensions of inequality combine to create multiple factors of advantage or disadvantage e.g. a disabled gay person would experience multiple layers of disadvantage.