

 Brent 	Brent Health and Wellbeing Board 29 January 2026
	Report from the Vice-Chair of the HWB, and Interim Director of Public Health and Leisure
North West London	Lead Cabinet Member for Adult Social Care, Public Health and Leisure – Cllr Neil Nerva

Overview of Inequalities

Wards Affected:	All
Key or Non-Key Decision:	Not Applicable
Open or Part/Fully Exempt: (If exempt, please highlight relevant paragraph of Part 1, Schedule 12A of 1972 Local Government Act)	Open
List of Appendices:	Appendix 1 - Presentation: Overview of Inequalities
Background Papers:	None
Contact Officer(s): (Name, Title, Contact Details)	Dr Rammya Mathew GP, Kings Edge Medical Centre rammya.mathew@nhs.net and Ruth du Plessis Interim Director of Public Health and Leisure Ruth.du-Plessis@Brent.gov.uk

1.0 Executive Summary

- 1.1. The purpose of providing Health and Wellbeing Board members a presentation on inequalities is to ensure we continue to improve and refine our efforts of tackling the inequalities within Brent and how deprived Brent is compared to other local authorities.
- 1.2. The attached presentation highlights what inequalities are; key data on inequalities within Brent and Brent compared to regional and national data. The presentation then goes on to give an overview of what best practice is in terms of tackling inequalities and how we have used this and local insights to further develop our approach to talking health inequalities in Brent.

2.0 Recommendation(s)

- 2.1. The Board is recommended to note the presentation

2.2 Members are encouraged to use the content of the presentation to help shape action and to advocate for approaches and ways of working to further embed tackling inequalities in all that we do.

3.0 Detail

3.1. Contribution to Borough Plan Priorities & Strategic Context

3.1.1. Tackling inequalities is a key feature of both the Health and Wellbeing Board Strategy (2022-2027) and the Borough Plan (2023-2027). Tackling inequalities is however relevant to a range of other strategies, including but not limited to; the Stronger Communities Strategy (2019-2023), the Inclusive Growth Strategy (2019-2040), the Brent Local Plan (2019-2041), the Climate and Ecological Emergency Strategy (2021-2030), the Local Housing Strategy, and the Youth Strategy.

3.1.2. The NHS has a legal duty under the Equality Act 2010 and Health and Care Act 2022 to actively reduce health inequalities, ensuring equitable access, experience, and outcomes for all, by eliminating discrimination, advancing opportunity, and fostering good relations, alongside a strategic focus on tackling root causes like poverty and working with partners as local anchors.

3.1.3. The North West London ICB Health Equity Programme brings health and care partners and local communities together to change how local services are designed and delivered with the aim of making it easier for people to access care and reducing health inequalities. The programme is delivered through three workstreams:

- Reducing healthcare inequalities
- Population health management building blocks
- Partnership working on wider determinants of health

3.1.4. In Brent, a key example of joint working between the local authority and the NHS is Brent Health Matters, a place-based partnership focused on improving access to services and reducing health inequalities. The impact of Brent Health Matters will be presented at this meeting.

3.2 Background

3.2.1 Inequalities can be described as unfair and avoidable differences across the population, and between different groups within society. Inequalities arise because of the conditions in which we are born, grow, live, work and age. These conditions influence our opportunities for good health and how we think, feel and act, and this shapes our mental health, physical health, wellbeing, and our income.

3.2.2 The recent Indices of Multiple Deprivation (IMD) 2025 statistical update indicates that Brent has become more deprived when compared to other areas. Brent is currently ranked as the 41st most deprived area in England, previously, Brent was ranked 79th most deprived on this measure in 2019 (although some of this change is due to change in how the IMD is calculated).

3.2.3 Brent's income deprivation score is the 12th highest nationally out of 296 lower tier local authorities. Brent remains the 4th most deprived borough of the 32 London Boroughs. Brent's Income Deprivation Affecting Children Index score

of 58.7% (was 18.2%) for children living in income deprived households is the 5th highest nationally. Brents Income Deprivation Affecting Older People Index score is 33.1% (it was 25.8%).

- 3.2.4 Of the seven domains (income, employment, education, health, crime, barriers to housing and services, and living environment), Brent ranks the highest across barriers to housing and services – 73.5% of its Lower Super Output Areas (LSOAs) are in the most deprived 10% of LSOAs nationally. This is the highest level in England.
- 3.2.5 There are eight policy objectives for tackling inequalities and a case study from Coventry showed their success in championing the Marmot approach. They had a particular emphasis on giving children the best start in life, by reducing barriers to employment, training and education and working with businesses on ‘social value’.
- 3.2.6 We must design health services through a wider determinant of health lens and embed inequalities in our approach to neighbourhood health.
- 3.2.7 In Brent our overarching approach to tackling health inequalities will be through three proposed workstreams:
 - 1) No wrong front door
 - 2) Community connectedness
 - 3) Population health management

4.0 Stakeholder and ward member consultation and engagement

- 4.1 Although there has not been direct consultation on the presentation, stakeholders have been involved in shaping the proposals for our approach on tackling health inequalities, led by the Integrated Care Partnership.

5.0 Financial Considerations

- 5.1 There are no direct budgetary implications of this report, however, this report is an aid to financial decision making about how we invest our collective resources to tackle inequalities.

6.0 Legal Considerations

- 6.1 There are no direct legal implications arising from this report.

7.0 Equity, Diversity & Inclusion (EDI) Considerations

- 7.1 Our approach to tackling inequalities in Brent should support us to deliver services in accordance with the Equality Act and Public Sector Equality Duty. Within the presentation we share data on inequalities both in relation to life expectancy and the Indices of Multiple Deprivation (IMD). We also highlight some of the work we are doing currently to address inequalities and examples of good practice from elsewhere.

8.0 Climate Change and Environmental Considerations

- 8.1 No direct implications, however, environmental sustainability is recommended by the Marmot team to be one of the aspects of tackling inequalities.

9.0 Human Resources/Property Considerations (if appropriate)

9.1 Not applicable

10.0 Communication Considerations

10.1 Not applicable

Report sign off:

Rachel Crossley
Corporate Director Service Reform and Strategy