

Foundations for the future

People are dying too young.

Together we can change this.

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Introduction

People in Great Britain are dying too young because of where they live or who they are. It's not okay that people living in poverty, people living in poor housing, people with low paid jobs or facing discrimination, have significantly shorter lives.

There are stark differences in quality of health and life expectancy between people living in disadvantaged areas and people living in affluent areas in the UK.

Men who are born in the most disadvantaged neighbourhoods in Scotland die 13.2 years younger than those born in affluent areas, and women in the most disadvantaged areas of Scotland live 25 fewer years in good health. In England and Wales, the situation is only marginally better. Each year, millions of people across the UK live in poor health and die too young due to avoidable health inequalities. Without action the problem is only getting worse.

Since 2011 People's Health Trust has partnered with a vibrant network of over 3,500 community

organisations across Great Britain, supporting them with funding at a grassroots level to find vital and timely solutions to tackle the causes of poor health.

Our approach is collaborative and innovative. We listen closely to communities to build <u>funding</u> <u>programmes</u>, develop <u>campaigning and policy work</u> and connect decision-makers with communities with lived experience of poor health and shortened lives.

Our focus is on the **building blocks of health**, tackling the shocking health outcomes caused by poor quality homes, a lack of access to good work and discrimination. We support people at the sharp end of health inequality, including racialised communities, disabled people, people with learning disabilities, older people, and women experiencing domestic violence.

So far, we have reached almost 800,000 marginalised people experiencing disadvantage to and we are making an impact across the building blocks of health. This annual review contains just some examples of how our work is improving people's lives and health across our Health Justice Fund priorities.

1 in 5

private renters reported that their housing issues or worries made them physically sick.

Source: <u>Shelter</u>, 2021



Partner with us

We have spent over a decade building relationships and giving a voice to people at the sharp end of poor health and early deaths, to ensure we invest in the right, evidence-based initiatives to drive both systematic change at a local level and influence policy at a national level. We know that our approach is having a huge impact.

The money we raise funds pioneering research and projects that offer local and grass roots solutions to society's most pressing health issues in some of the country's most disadvantaged neighbourhoods.

By partnering with us, you can help support people to live longer, healthier lives.

We have reached 3,500 community groups and almost 800,000 people who are experiencing disadvantage and marginalisation.

13.2 years

Men in disadvantaged areas of Scotland die **13.2 years** earlier than those in affluent areas.

Source: National Records of Scotland, 2024

We support people like:

James

 James was experiencing severe social anxiety and unable to attend school. Now James has access to skills training and peer support, he is increasingly confident in social settings and has secured a paid trainee job locally. <u>Read his story</u>

Helen

 Helen felt like giving up after being hospitalised waiting for repairs to damp and mould in her home. Now Helen is making her voice heard as part of a tenant action group, she is empowering local people and together they are fighting for improved housing conditions for their community. <u>Read her story</u>

The health inequality gap is widening daily. Last year we were only able to support one in five life-changing projects – now we are looking for partners to help us fund the other four.

To support us, click here.



Welcome from our CEO and Chair

Welcome to our review of the year.

Two years ago, we set out four ambitious priorities:

- Listening to and supporting marginalised groups
- Building evidence and practice around what works
- Speaking out boldly to those in power and
- Developing further as a diverse, equitable and inclusive organisation.

These are critical foundations if we are to meet our overall ambition to address the causes of health inequalities. They are just as pertinent as ever.

The evidence shows us that health inequalities are still widening and that people are dying too young because of their housing, their jobs, their income, their lack of access to nature, heating and good, affordable food. Lives are cut short when families live in damp, cold homes, cannot afford to eat well and even lack somewhere nearby to take their children to play. Life expectancy has fallen in most parts of Great Britain. New data from the ONS shows that in four fifths of council areas, life expectancy for men has dropped, while the life expectancy for women has dropped in seven out of ten areas. There is also a growing divide between the south of England and the rest of the country. The areas with highest life expectancy for both men and women were all located in the south of England.¹

Over 13 years we have supported, listened, and learned from communities, when they tell us what works to make a difference. We grantfund communities to tackle health and improve wellbeing. And we bring people together to learn from each other and provide expertise on issues of critical importance to health in their area. These channels of communication mean we can also measure impact and influence local and national policymakers. The stories you will read throughout this report are a testament to this. **>** We are immensely proud of our experts by experience network – a 500-strong network of community organisations across England, Scotland and Wales which has been an early warning system for major health crises such as mental health, housing and winter fuel. We have worked with a range of partners including Health Equals on its major public facing campaign, the Department of Health and Social Care on mental health for racialised communities and men, and the Greater London Authority/Institute of Health Equity on discrimination and health.

Our <u>Community manifesto for health justice</u> was developed directly with communities. It is the blueprint for our influencing of national policies, which has already had some early success. <u>Read more on our impact page</u>.

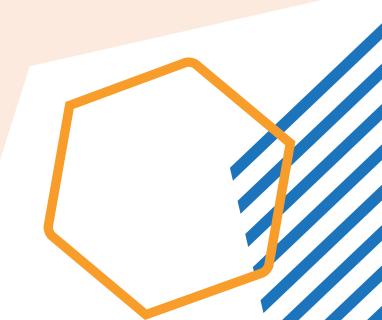
Our <u>Homes for Health</u> network provided powerful first hand testimonies. Blending these with national data, we mounted an extensive national campaign, showing the devastation poor housing wreaks on health. Our campaign secured extensive print and broadcast media coverage, including across the BBC, independent and local press. We asked the Government to commit to resourcing housing enforcement, needed to make new housing legislation meaningful, and are delighted to have secured a commitment to do so. Our new Health Justice Fund addresses the building blocks of health. This flexible grants fund allows us to respond rapidly to emerging needs expressed by our experts by experience. This year through the Health Justice Fund we have launched priorities on mental health and access to nature, and on **advice** for people extremely overwhelmed by their circumstances. These will be followed by a ground-breaking fund focusing on jobs, young people and their mental health looking at addressing acute mental health to support young people into good quality work. We will also launch a new priority looking at how to understand and address the effects of discrimination on health. This will look at everyday and lifetime discrimination across a range of protected characteristics. We are delighted that both these priorities will be evaluated by the National Institute for Health Research's School for Public Health Research.

Deepening our commitment to Equity, Diversity and Inclusion has remained a key feature of the Trust's work. Over the course of the last year, we have made EDI a critical part of our new programme design, including setting the agenda at the outset; setting policy priorities; community engagement and influencing grant processes. We will, over the coming year, be writing more about this and its impact. All of our work would be impossible without our valuable **partnerships**. These include with Health Equals, GLA, Health Foundation, NPC and Everyone's Environment, Funders Race Equality Alliance, Inequalities in Health Alliance, We're Right Here, National Institute for Health Research's School for Public Health Research and Youth Futures Foundation.

The scale of the health inequalities faced by communities remains immense. Many approach us, and requests for funding far outstrip available funds. We are building new partnerships with corporate, public and third sector to help expand our reach. Join us if you want to be part of the drive to stop people dying too young.

John Hume	Jer
Chief Executive	Cha

Jenny Edwards CBE





Homes for Health

Having a safe, secure and affordable home is one of the building blocks of health, but it is not available to everyone.

Too many people in Great Britain are living in poor quality, insecure housing particularly in the private and social rented sectors. Unequal access to affordable, secure and good quality homes means that, for many people, poor housing is a direct cause of short and long-term health issues. Bad housing can mean unhealthy living conditions, with problems such as damp and cold, which are made worse by poor insulation and rising fuel costs, overcrowding, a lack of poor-quality repairs and unsuitable facilities which can impact the ability to make safe and healthy food. These problems can lead to respiratory conditions, poor cardiovascular health and musculoskeletal problems amongst other health conditions, as well as having a negative impact on mental health



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Insecure tenancies lead to stress which worsens physical and mental health, due to the uncertainty of living in temporary accommodation or worrying about unfair eviction. Poor quality housing can also impact our social relationships.

Low-income households, minority ethnic communities, disabled people and people seeking asylum are more likely to experience poorquality housing. These impacts are particularly stark for people experiencing multiple forms of disadvantage and are further entrenching health inequalities.

What we are doing

In November 2023, we launched Homes for Health with a commitment of one million pounds, focussed on the key issues affecting people living in rented homes.

We are supporting ten projects across Great Britain by providing resources, training, and facilitating network to help to find practical, on-the-ground solutions, as well as encouraging action by decision-makers. Learning from expert local groups of people about how housing issues are affecting their communities and their health informed this programme and continues to inform our work as we share insights and recommendations with local and national policymakers. In March 2024 we launched our Homes for Health campaign, focussed on the need for stronger enforcement in the private rented sector which was successful in gaining national media coverage and securing meetings with MPs. We are pleased that the government has now made a commitment to extend the Decent Homes Standard as part of the Renters' Rights Bill, and to provide ringfenced funding for enforcement. We are closely following the passage of the Bill, which will secure important rights for tenants and has potential to improve their health if enforced properly.

To talk to us more about this or to support this campaign, click here.



39%

of private renters have housing problems or worries that leave them feeling stressed and anxious

Source: Shelter, 2021

Case study

Tenants taking action

Helen, Ely, Cardiff

Helen talks about the damp and mould problems that led to her hospitalisation for respiratory problems and how she feels more empowered and better able to change housing conditions in Ely as a member of Citizens UK's Homes for Health tenant action team.

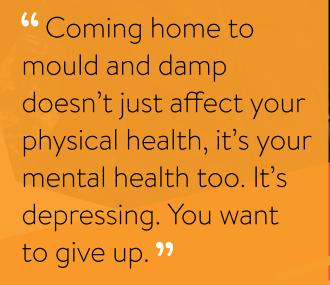
66 I had really bad damp and mould from the time I moved into my social housing four years ago and it went on and on. I was calling the social housing provider to ask for repairs every three days for six months. My mental health was absolutely crushed. Coming home to mould and damp doesn't just affect your physical health, it's your mental health too. It's depressing. You want to give up.

It was excuse after excuse from the housing providers and they kept telling me someone will be in touch. In the end, I had to threaten them with legal action. I didn't have the resources for any of that, but I didn't know what else to do. And it still took them six months before they came to look at it and it was a further couple of months before anything was done.

By then, I'd been in hospital three times with a respiratory problem. The first time I literally couldn't breathe and my temperature had gone ridiculously high. I was given intravenous steroids, intravenous antibiotics. It was very frightening. But then when you realise it is down to the conditions you're living in, it was anger provoking. It's hard when you want to do something but you can't.

But it inspired me and now I'm able to talk about it and I'm able to do something as part of the tenant action team to get other people involved who are in that situation too, to come along.

The group has opened up workshops so that people understand their own rights and they know who to talk to about repairs and issues with housing. A lot of us come into social housing and we don't know what we're entitled to. We want to empower tenants to argue the case and fight for their rights. »



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⁴⁴ It's about everyday people making massive change. We can only do it when we come together. ⁹⁹

We want to create more voices coming out and saying no, this isn't right. It goes a heck of a long way when you hear the power of someone's testimony, the heartbreaking stories that you hear. Kids that are suffering and parents that feel powerless to change it. These are the stories that will make that change. We know that by building power in our community, our community can make the change.

In my own personal life, it's been a massive help for my mental health and confidence, even though I only started working in the group this year. I've witnessed people becoming empowered. And I've witnessed confidence building and I've seen the change in just being heard just and taking action. The tenant action team was almost like a breath of fresh air for me and for everyone else because when people come along and they talk to other people they realise they can actually do something. What a change it makes.

The most positive thing about the group and this project is that they take us – everyday people – and they let our voices make a difference. It's about everyday people making massive change. We can only do it when we come together. **??**

About the project

The Homes for Health project in Ely, Cardiff is led by Citizens UK and works with social and private tenants.

Using a community organising approach, the project is supporting a tenant action team to build knowledge, voice and power to influence landlords to improve local housing conditions in ways that can ultimately improve health outcomes for tenants. Grant amount: £57,359

Fuel poverty and cold homes

⁶⁶ I am a single disabled woman and I can't afford to put my heating on for long and depend on jumpers and blankets to keep warm. "

In July 2024, the UK government announced changes to the eligibility for Winter Fuel Payments in England and Wales.

This was replicated by the Scottish Government in September. While around 1 million people are expected to qualify for additional support, according to Age UK around 2.5 million older people on low incomes or who have other vulnerabilities will fall short of qualifying, placing their health at increased risk over winter. Older people who are unable to adequately heat their homes are especially at risk of a stroke, heart attack, hypothermia, flu, respiratory diseases, falls and injuries and, ultimately, premature death.¹

In response to serious concerns we had about the impact this would have on older people's health, we asked our expert network of local, grassroots, community organisations working with older people across Great Britain to share their views on the planned changes to the Winter Fuel Payment and to tell us about the reactions of older people

to the announced cut. More than 30 organisations representing thousands of older people quickly responded to our call, with some taking part in a focus group, many submitting written evidence. and several conducting their own discussion groups and surveys with older people in their communities based on our questions, which they shared back with us.

Our report, 'How to survive during winter' was published within two weeks of our call for evidence.

Through community organisations' testimony and evidence, a stark picture emerged, revealing that the announcements on changes to the Winter Fuel Payment are causing fear for older people's mental and physical health. There is widespread stress, anxiety and concern amongst the older people these grassroots organisations work with.

Based on these views, we called on the Government to reverse or postpone the changes and that if going ahead, a full equalities impact assessment should be carried out; consideration

made as to how the policy is communicated to reach those most likely to be harmed; and dedicated resources should be provided to the voluntary and community sector who are at the front line of the implementation.

Our report made the front page of a **national newspaper**, and secured responses from the government and opposition parties. We will continue to campaign for a change of approach and are working with other charities to continue to highlight the potential impact on older people's health.

Alongside calling for action from the Government, we launched a major fundraising appeal for £250,000 to provide vital support for thousands of older people who need it the most.

To talk to us more about this or to support our appeal, click here.

Download report.



What we heard:

66 [It's] pushing us to the limits, terminally ill can't afford to put lifesaving machinery on.**?**

66 Being on my own worries me, I know I cannot afford to heat my home.**??**

66 My arthritis and poor health will increase, can feel it already. Nobody seems to care, the people in power, I mean, do they actually understand the hardship and pain people are going through? It's wrong, it is just wrong.**??**

66 For those dealing with health problems, the situation is even more concerning. They can't afford to cut back on heating, and the uncertainty around these changes is causing a lot of anxiety.**??**

66 We fear that these changes will further widen social inequalities, particularly within marginalised communities.**??**

66 We had 105 people in the centre yesterday. Figures have gone up based on need. We've never had this much footfall during the cost-of-living crisis. A lot of people are already in energy debt too. **??**



Nature for Health

The mental health crisis in Great Britain is made worse by a number of factors including the rising costs of living, low income, lack of access to natural spaces, and discrimination.

People from minority ethnic communities are at higher risk of developing a mental health problem in adulthood, and are less likely to receive support for their mental health. Evidence from health surveys has found that poor mental health is also more likely amongst people with long term health conditions, disabled people, and people with a learning disability.

Access to natural spaces is not available to everyone. On average, the most affluent 20 per cent of neighbourhoods in England have five times the number of parks or green spaces (excluding gardens) than the most disadvantaged 10 per cent of neighbourhoods.¹

What we are doing:

Access to natural spaces can improve health, and help to prevent poor or worsening health outcomes, both physically and mentally.

In September, we committed £500,000 and began funding 16 projects across England and Scotland to improve the mental health of some of the most marginalised people who are experiencing disadvantage. We are working with expert community organisations to enable people who need it most to have greater access to natural spaces and naturebased activities, from gathering in a community garden to do outdoor cooking to foraging and doing local conservation activities in local woodland.

Funded projects are all working with specific communities who need support including women who have experienced domestic abuse, disabled people, refugees and people seeking asylum and gypsy and traveller communities. Projects are also working to influence locally, including to improve funding for nature based work, access to nature based social prescribing and for better access to nature based education. As part of the evaluation, projects are using the Warwick-Edinburgh Mental Wellbeing Scale to measure the impact of the project on people's on mental health and wellbeing.

To talk to us more about this or to support us, click here.

> A ten per cent increase in exposure to nature can give **five years** of better health. **Source:** <u>The Kings Fund</u>, 2013

10%



Improving mental health through nature

James, St George's, Bristol

Staff member James Broadley discusses how accessing nature can improve young people's confidence and mental health.

66 At Birch Collective we predominantly work alongside people aged 16–25 experiencing mental ill-health or social isolation. We support those who are not in employment, education or training as they are disproportionately at risk of experiencing mental health difficulties.

Many young people find that when they get to 18, there's a drop off in mental health services available to them and we've heard from participants of the 'cliff edge' of approaching 18 and the lack of available support for the transition between childhood and adulthood. On top of this, we know that younger adults are more likely than those in older age groups to report feeling lonely. They are expected to know what to do now that they're an adult – find a job or go into education – and that's often not the case. What we provide is exposure to and a relationship with nature and the earth which can alleviate mental health problems. Being together with other people in that process amplifies the impact.

We're also trying to remove barriers for marginalised and underrepresented groups in accessing mental health services by offering community based interventions. We suggest that social action, peer support, and connection to nature can provide an alternative, or powerful additions that carry less stigma.

Our activities and organisation are informed by the young people we support. Our Steering group committee meetings are made up of young people who have come through Birch before, have been supported by us or are connected to us in some way. Our sessions »



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at the moment are on the intersection between mental health, grassroots community and nature. We will gather the insights that come from the sessions and our future work will be informed and shaped by them so that we can better serve local young people.

I've seen quite a few people heal and grow into themselves as part of our work. One person was incredibly shy on their first session and came with their parent who stayed for the first part. Once they left, I spent time building a raised flower bed with the person. They didn't really speak much. Seeing them four months on, it's a different person. When they speak now, they're asking questions, their eye contact is stronger, they've made connections with other people, they put themselves forward to answer questions. We've really seen that person grow in confidence.

At our week-long camp, I was able to see the change in an accelerated way. Many were leaving Bristol for the first time in a very long time or the first time ever. We've really seen so many young people grow in confidence and improve their mental health. **??**

About the project

The Nature for Health Seedlings for Change project in St George, Bristol, builds from Birch Collective's main activities and works with people aged 16-25 experiencing mental health problems and social isolation who are not currently in education, employment, or training.

Through activities including weekly nature sessions, residential trips and a forest school, it will aims to increase practical skills and confidence and improve physical and mental wellbeing. ⁶⁶ The camp really allowed me to calm down and just allow life to flow in whatever way it needs to. It helped me to get back in contact with nature and to learn more about it. ⁹⁹

Luna Fernandez Project member

Grant amount: £36,350





Advice for Health

Having access to timely, free and independent advice when it is most needed is critical, and getting support can reduce anxiety and longer-term stress and improve health.

For people experiencing marginalisation, discrimination, and disadvantage the need for advice services on matters such as housing, finance, debt or asylum is even greater.

The cost of living crisis and over a decade of stagnating income, austerity, and widening health inequalities have led to increased need for advice services, and an increased response, but some people are not seeking or able to access these because of a range of issues. Some feel overwhelmed by challenges they face, such as insecure income, poor health or cultural or language barriers. The stigma associated with advice services can also prevent people from accessing services. Other reasons include a lack of public transport provision to attend services in person, digital exclusion for online support as well as mistrust of services.

What we are doing

In October 2024 we began funding five projects in the Midlands and Southern England focussed on supporting people experiencing marginalisation and disadvantage to feel less overwhelmed and to access advice.

These projects are run by expert local organisations and the funding aims to see improvements in people's mental and/or physical health. Projects are focussed on supporting particularly marginalised groups including people with learning disabilities, refugees, and people affected by trauma and domestic violence as well as by poverty and poor mental health.

Advice for Health aims to result in changes to existing advice services so that they better meet the needs of groups of people who most need advice. This could be developing more culturally appropriate services, or undertaking community outreach to groups not currently accessing advice.

To talk to us more about this or to support us click here.

Case study

Accessing vital support

Azra, Luton

Azra Jan, project leader at One Stop Advice and Training Centre, discusses how the organisation supports women's empowerment by ensuring women know their rights and have access to vital support.

66 Most of the women we support feel like they've been pushed from pillar to post. They've been signposted to a number of different organisations when the support or capability isn't actually available. As a result, it's broken their confidence and they have stayed at home. They've given up on hope that they can improve their lives and wellbeing. Most of them are in such a dire situation where they are reliant on food banks or support from people they know to pay rent because they don't know that they are able to apply for benefits that would help them with household costs. It is imperative that women who are struggling are made aware of the benefits that will support them and their families in the long term.

One woman we have supported came with her family from another country. Her husband was educated, in a well-paid job and they had children together. Her husband took control of the finances, and she was a full-time homemaker.

She came to us explaining that one morning her husband left and he wasn't coming home. She just broke down because she had absolutely no idea where to start, what to do, what her rights were and what she was entitled to. She was worried about child maintenance and benefits to look after her kids. The tenancy of the house was in his name and she didn't know if she could stay there or pay the rent. She was so upset and hurt.

We see so often from women we support that they lack confidence or they feel anxious or apprehensive about systems – like the benefits system – that are not familiar to them. Mental health is a big issue preventing women we see from accessing services. So are language barriers and lack of cultural sensitivity.

With the woman we supported, we went through everything with her, making sure she got Universal Credit, child benefits, making sure her housing situation was right and applying for discretionary housing benefit so she and her children could continue to live in her home, and we helped her successfully apply for personal independence payments. »

20%

Demand for advice services increased by **over 20%** in 2022/23

Source: <u>Citizens Advice</u> and <u>Advice UK</u>, 2023



Three months on, she is financially more secure and her mental health has improved. She was in a relationship where she was always being put down but now, because she has more understanding of what she is entitled to and how to apply for it, she feels like she's got ownership and she's in charge. She feels like someone now and she's so happy. She said if it wasn't for us, she doesn't know where she'd be today. We were her lifeline. What's important for women in similar positions in our community is to be seen by somebody that can relate and be sympathetic. We get it, we understand how they must feel embarrassed or they feel they have let the community down by asking for help or they're somehow tarnished by leaving their relationship or getting divorced. It's about reassuring and moving forward, making sure that women are in a better financial position and are happy mentally and physically. **??**

About the project

One Stop Advice and Training Centre's Positive Pathways project provides advice to women from South Asian communities in Luton facing disadvantage and who are currently unable to access support.

The women may be facing domestic abuse and cultural and language barriers and are marginalised and discriminated against because of their vulnerable and insecure situations. ⁶⁶ Mental health is a big issue preventing women we see from accessing services. So are language barriers and lack of cultural sensitivity. We are making sure that women are in a better financial position and are happy mentally and physically. **?**

Participants are supported to find out about their rights and to improve their welfare and financial situation, leading to positive impacts on their health and wellbeing.





Good work, young people and mental health

Mental health is a significant and growing problem for young people in Great Britain. For those young people who are not in employment, education or training, the risk of poor mental and physical health is far greater than for those who are in work or education.

The numbers of young people referred to mental health services for anxiety and depression <u>is reported</u> to have doubled since the Covid-19 pandemic, reaching an average of 500 per day and totalling well over 180,000 over the last year. Nearly one million young people leave school with no qualifications and few prospects of finding any work. Currently there are 946,000 young people not in employment, education or training – and we have heard directly from young people that this is both a cause and a consequence of poor mental health.¹

What we are doing:

To help remove some of the barriers young people face, we are setting up a £850k fund to work with young people experiencing mental health problems to pilot ways of working to remove these barriers and secure meaningful training and employment opportunities.

Starting in early 2025 and working with mental health specialists in communities, this funding will support young people to access employment and improve their mental health. Working with donors, this will be a pooled fund, with each £1 donated being matched directly by us.

This work will be evaluated by the National Institute's for Health Research's (NIHR) School for Public Health Research, meaning we can provide data-driven impact reports to demonstrate the impact of the funds on the lives of young people.

> To talk to us more about this or to support this priority, click here.

1 Young people not in education, employment or training, UK: 2024, Census 2021, ONS.

Case study

Supporting young people into work

James, Longbenton, Newcastle upon Tyne

James talks about the improvement to his mental health and the skills he's learned as part of Justice Prince's Barriers to Employment programme which supports young people to gain qualifications and training.

66 I badly suffered with anxiety and didn't leave my house for almost a decade from around being eight years old.

I suffered bullying in school from teachers which caused panic attacks whenever I was in a classroom. Because of this, every time I tried getting back into education, I failed. That lack of qualifications has really hindered my ability to find work. It also gave me anxiety around authority figures which doesn't help in interview situations.

You don't realise how important qualifications really are until you're looking for work, no matter how

many applications you give out. Justice Prince is the only place that would actually give me a chance.

My mum contacted Justice Prince which led to both of us going to the community garden. From there I became more involved with the organisation. I started volunteering for a few hours a week and as I worked with the team, my confidence grew and that led to more opportunities. I was introduced to the Barriers to Employment programme by another young person. I now volunteer at Justice Prince, I sit on the advisory board and I work on a number of projects involving young people in Longbenton.

One of the first things I did was help design a peer research survey for young people about the obstacles in the way to getting a job or an apprenticeship. I had to canvas and survey other young people in the area for our research. I was the lead engagement peer researcher.

It was my first job and it was a struggle to begin with, but it helped me to develop as a person. It developed my confidence 100%, it developed my self esteem 100%. My health and my communications skills too, without a doubt.

At first I said 'no, I really can't go out and stop people on the street and talk to them.' [Justice Prince Director] Julie always said 'yes you can.' Eventually I did do it and my confidence grew. My anxiety reduced because I was coming out of the house and taking on all these responsibilities.



I got deeper into the project, more involved in leading its development until we actually had the final Barriers to Employment report which we presented at Parliament to MPs last year. I was so anxious and nervous to be in a room with all these MPs and Baronesses sitting in front of me. But as the day went on I became more comfortable and confident until I was talking with MPs about the report and the problems facing young people in Longbenton.

I also took the lead in organising a job fair for young people. I contacted 16 local employers and people at the local authority to invite them to the fair and made a presentation for the day to show them our work. Barriers to Employment has had a huge benefit to my mental health. Meeting new people and getting out of the house was so important. It gave me a purpose and somewhere to go. I feel safe going outside now which is not something I could say in the past. It made me become more sociable too. I went from knowing no one to having friends.

Now I feel prepared and ready to get out there and apply for jobs. It's made such a difference to me. **??**

⁶⁶ It developed my confidence 100%, it developed my self esteem 100%. My health and my communications skills too, without a doubt.²⁹

About the project

The Barriers to Employment programme in Longbenton, Newcastle upon Tyne is led by Justice Prince who have been supported by People's Health Trust for 10 years through Local Conversations and currently through Partnerships for Health.

The current grant supports strategic partnership work with the goal of increasing influence and improving health outcomes for local people who experience the greatest health inequalities.







Discrimination and Health

Discrimination – whether racism, sexism, ableism or homophobia – is a profound social injustice and it fundamentally affects people's physical and mental health.

Research shows that discrimination impacts health in a number of ways. It is a driver of chronic stress which has significant consequences for people's mental health and physical health, including accelerating biological ageing and premature death.

People who report more than one type of discrimination are much more likely to have mental health problems, including symptoms of depression. There are also associations with post-traumatic stress disorder and psychosis.

What we are doing

We are setting up a fund to understand the impact that everyday and systemic discrimination has on the health of specific groups of marginalised people, as well as the ways in which this harm can be reduced at societal and institutional levels through work led by community-based organisations.

Starting in early 2025 and working with grassroots community organisations across England, this funding will enable us to better understand the experience of everyday and lifelong discrimination on groups who have single or multiple protected characteristics and people experiencing discrimination because of their social class. It will look at how communities can work together through local action on ways in which the harm that discrimination causes can be reduced societally and/or institutionally.

Working with donors, this will be a pooled fund, with each £1 donated being matched directly by us.

This work will be evaluated by the National Institute for Health Research's (NIHR) School for Public Health Research, meaning we can provide data-driven impact reports to demonstrate the impact of the funds in tackling discrimination.

> To talk to us more about this or to support this priority click here.

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⁴⁴ Joining the group for me has opened so many doors and helped me not just with my mental health but with life in general. ⁷⁷ Case study

Tackling discrimination in the Roma community

Marisa, Govanhill, Glasgow.

Marisa, Community Facilitator at Community Renewal Trust, talks about her experiences of discrimination and how getting involved with the Roma Youth Group supported her and is now enabling her to give opportunities to other young Roma people.

66 I started volunteering at the Youth Centre from a really young age, about 14, and I'm 21 now. I started as a volunteer then went on to work at Community Renewal.

In secondary school, there was bullying and discrimination. I always stood up for myself, but I know that other people couldn't. So I usually try to stand up for people.

I could see that some kids were losing confidence in themselves and that affected whether they came to school or dropped out, or their parents got scared and didn't want them to go. By the time I left secondary school I didn't see it happening as much as it used to. There are a lot of stereotypes held against Roma people. It's getting better in schools but outside there is discrimination. You walk into a shop and they're watching you because they think you're going to steal.

We had a lot of teachers I could depend on, who stood up for us and made us feel welcome. So if we did ever feel like we were being discriminated against we had somewhere to go.

I struggled a bit with my mental health and through Community Renewal I got support with an art therapist when I was 16. I didn't realise I needed help. Joining the group for me has opened so many doors and helped me not just with my mental health but with life in general.

After school I needed encouragement from a community worker to go to college. I didn't go at first and I had no idea what I wanted to do. It's not the same coming from teachers or career advisors. It was just the little push and just someone saying, oh, yeah, you can actually do it. I came back to **>**





the youth group and I started working here. After that I kind of got my encouragement back because I lost it for a while. Here, you can mess up 10 times and you could change your mind 20 times and it's fine. They say just come back whenever you feel like it. I came back here and my motivation came back. I saw the opportunity. I studied community development and loved it.

We had an amazing youth worker here who really cared and believed in us. She told us that whatever background we're from, we could do the same thing as anyone else. Some people don't believe or trust we can handle things. I was part of the young leaders project here and it did a lot for us. Not just encouraged us but inspired us. Being part of the Roma community in Govanhill means feeling accepted and knowing there are others like me, people that face similar difficulties. Through our work here we've supported other young people, they managed to get so many opportunities and learn new skills. One has got into football coaching because of the opportunities they got.

We didn't really have that in the past. Now it's slowly transitioning to our community having more equal opportunities with others. It feels great.

We want to offer the support that we had from our peers to the young people that come into our youth group now. That's our goal. And we want to see Roma people represented in different jobs, like GP receptionist, or team manager, as we don't see that right now. **??**

About the project

The Roma youth group in Govanhill, Glasgow is led by Community Renewal Trust who have been supported by People's Health Trust for 10 years through Local Conversations and currently through Homes for Health and Partnerships for Health. The youth group have worked to reduce stigma by building positive press coverage as well as supporting Roma young people. The current Partnerships for Health grant supports strategic partnership to influence policy and practice in Glasgow, and work towards a National Roma Integration strategy.

Grant amount: £49,922



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Our impact

Throughout the year, we have made progress in areas which affect people's daily life and health.

Our influencing work

We brought more than 50 grassroots community organisations together to create our <u>Community manifesto for health justice</u>, with nine policy asks to address health inequalities across the building blocks of health.

Homes

In March 2024, we launched a major campaign based on one of our manifesto priorities. 'Homes for Health – Time for Action' calls on the Government to properly resource the enforcement of housing standards in the private rented sector. Working with our Homes for Health funded partners, we secured national and regional print and broadcast media coverage, including a response from the Department for Housing, Levelling Up and Communities and commitments made by MPs to raise the issue in parliament. The new government has now committed in Parliament to our ask for ringfenced funding for housing enforcement and we are following this closely ahead of the next local government finance settlements. In June 24, we responded to the consultation on the Scottish Housing Bill, calling for the Scottish Government to introduce a more effective enforcement regime for housing and health standards in the private rented sector.

> Find out more about Homes for Health.

Income

In October 2024 we released our report on the <u>Winter Fuel Payment</u> in response to the English and Scottish governments' announcements of changes to eligibility criteria of payments. The report, based on community organisations and older people's testimony, received national media coverage including responses from Westminster government and opposition parties. We are continuing to influence to ensure as far as we can that the impact on those most affected by the changes is minimised, and that the sector can support those who need it.

Find out more.

We were invited by the Treasury department to respond to the budget on 30 October.

See our response here. »

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⁴⁴ A massive thank you to People's Health Trust for the excellent way you are managing our grant. Excellent communication, training and support provided. The need for greater awareness of social justice is constantly on the increase and we must continue to hold discussion to encourage all to keep taking about it."

Funded partner, Active Communities.

Collaborations on health inequality

In August 2023, we contributed to the IHE's report 'Structural Racism, Ethnicity and Health Inequalities in London' by convening experts by experience from our network. The report, published in October 2024, found that people who are repeatedly exposed to structural racism during their daily lives experience worse physical and mental health as a direct consequence.

As an active member of the <u>Health Equals</u> <u>campaign</u>, we supported the new Let's Make Health Equal campaign in June 2024 including providing spokespeople and convening an expert advisory group from our network to develop the campaign's planning and testing. There were over 10 million opportunities to see the campaign through its media reach and over 50 MPs and Peers have now committed to advocate for making health equal in Parliament. As part of the <u>Inequalities in Health Alliance</u>, we wrote to Andrew Gwynne MP in September to welcome the government's new health mission board and calling for clear plans to take it forward.

In October 2024, we signed an open letter alongside the Association of Directors of Public Health calling for a cross government approach to public health and funding to improve health.

Our network of experts by experience

Through our network of 'experts by experience,' we engage with hundreds of current and previously funded partners who are working at the front line of health inequalities. Over the year we convened 14 events, engaging with more than 500 community organisations across Great Britain.

Our network directly informed our work over the year including the launch of our <u>Community</u> <u>manifesto for health justice</u> and <u>Health Justice</u> <u>Fund</u> in December 2023, and the priorities within it that have been developed since, as well as our » report on the impact of the changes to the <u>Winter Fuel Payment</u>. We also met with our network in response to the <u>racist riots in August</u>.

In November 2024, we gathered views from our network to better understand the most pressing issues facing communities experiencing disadvantage around the country, and how these are affecting people's health. We had a strong response to our survey and their views will inform our future work across funded programmes, influencing and fundraising.

We ran 11 capacity building events over the year to support more than 100 funded partners on their priorities – including EDI, finance, safeguarding and fundraising. Many told us these sessions helped them secure additional funding, recruit volunteers, and strengthen their practice.

Evaluating our work

Working with Social Life, we completed the final wave of the longitudinal study of our funding programmes in May, which investigates the impact of our Active Communities and Local Conversation funding programmes and compares impact with national data sets. This study along with the other learning points from our evaluations over the last five years will be released in early 2025. This June, we secured a partnership with the National Institute for Health Research (NIHR) School of Public Health Research (SPHR) to work on a new pilot scheme to evaluate voluntary sector initiatives. This focuses on two of our newest Health Justice Fund strands, good work for young people's mental health and discrimination.

EDI and the climate crisis

Also in June, as part of our collaboration with Everyone's Environment, NPC published a briefing for charities and funders and aims to answer the question, 'How will the climate and nature crises affect people experiencing health inequalities?' In August, we convened our funded partners to discuss the topic which fed into a policy briefing.

In July, for the third consecutive year, the Trust completed the Funders for Race Equality Alliance's race equity audit of grant-making, which includes measuring the proportion of grants that were awarded to organisations led by and for racially minoritised communities. Our consistent proportion of around 25% compared similarly to other FREA members.

Working with our expanded network of experts by experience to reach a huge community of practice, we will be building on these successes in the year ahead in our work to improve people's health and address persisting health inequality.

91%

of **funded partners** agreed their contact with the Trust had been positive in relation to **equality**, **diversity and inclusion.**

Source: <u>People's Health Trust</u> <u>stakeholder survey</u>, 2024.

HEALTH EQUALS

Partnerships

As well as our core partnerships with people and communities we fund across England, Scotland and Wales, we have partnered with a number of national organisations and coalitions to increase our impact.



Campaign partners

Health Equals

We are a founding member of Health Equals – a group of organisations who want equal opportunity for health and wellbeing for everyone. This fiveyear initiative is working with a membership of 29 organisations from across different sectors and building blocks of health.

Inequalities in Health Alliance

We are part of nearly 80 organisations calling for a government strategy to use the socio-economic duty, section 1 of the Equality Act 2010, to address health inequalities; and to adopt a 'child health in all policies' approach.



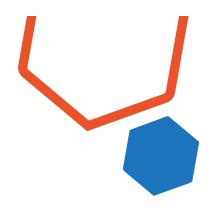
We're Right Here

The Trust is a founding funder and supporter of the We're Right Here campaign. This national campaign is driven by community leaders and calls on Parliament to establish three new community rights: to buy community spaces, shape public services and have greater control over local neighbourhood investment.



Living Wage Foundation - Living Wage Places

The Trust is a principal partner of the Living Wage Foundation and member of the Living Wage Advisory Council. We currently fund Living Wage Places.



NIHR School for Public Health Research

Research partnerships

School of Public Health Research (SPHR)

We are collaborating with the NIHR's School of Public Health Research on a new pilot scheme that aims to evaluate voluntary sector initiatives developed and delivered by communities.



Everyone's Environment

We are part of this NPC-led collaboration of more than 70 organisations focusing on the impact of environmental crises on people's lives. We have funded the health inequalities strand of the programme exploring, through research and conversations with people experiencing health inequalities and who are and will be most affected by the health impacts of the environmental crisis.



We are co-funding research into debt and temporary accommodation, to find solutions to the problem of thousands of families and children who are trapped living in temporary accommodation because of Local Authority housing



Funder partnerships

Funder Commitment on Climate Change (FCCC)

Hosted by the Association of Charitable Foundations (ACF), this is a high-level framework supporting funders to play their part in tackling the causes and impacts of the climate crisis.

Funders for Race Equality Alliance (FREA)

We are part of this network of funding organisations committed to addressing racial inequalities in systems and communities in the UK.



Governance

How we manage the organisation and our funds

The work of the Trust is overseen by our Board of Trustees who bring different experiences and backgrounds.

This year, five new Trustees joined us as we sought to widen the experience and diversity of the Board and prepare for an effective handover in advance of three longer standing trustees stepping down in 2024 and 2025. Two committees support the work of the Board, providing advice on finance, audit and operations, and strategic oversight on policy, research and advocacy, with places for independent members on both.

Work on The Trust's Equity, Diversity and Inclusion (EDI) Action Plan continued through the year. We have actively recruited Trustees to strengthen the Board's collective experience in relation to the communities we support, with a focus on people experiencing racial inequality, disabled people and people from lower socio-economic backgrounds. The Trust has also established a Shadow Member scheme to provide opportunities to people from these backgrounds to develop their knowledge and skills to become a Trustee.

We have continued our work to improve our Equity, Diversity and Inclusion practice across the organisation. We've implemented changes to improve the data we collect from our funded partners and are now developing an EDI practice framework for our funding programmes, from inception and development, through to grant management.

We continue to benchmark our EDI work in grant making through the Funders for Racial Equality Alliance (FREA) as well as working extensively with the staff team to improve our collective understanding of EDI in practice, and to ensure we are an inclusive place of work.

Last year, as part of our strategic goal to make a significant contribution to address the climate crisis, we signed up to ACF's Funder Commitment on Climate Change and we submitted our first report in early 2024. We self-assessed ourselves as making good progress against the six pillars and we have committed resources to this area of work in both staff time and through Nature for Health.

More information is available in our Trustees' Report and Financial Statements.

Find out more about our Trustees.



Organisations funded

in 2023/24



Active Communities

Ardour Academy LTD

Barking & Dagenham Progress Project

Barking and Dagenham Ab Phab Youth Club

Brentford Community Boat House

EFA London

Flexi Foundation

Hounslow Multi-cultural Centre

Moon Academy CIC

Physical Empowerment CIC

Southall Community Alliance (SCA)

Speak Out in Hounslow

Thames Life

Ultimate Counselling C.I.C

Young Steps Ltd

Health Justice Fund

Advice for Health

Cambridge Acorn Project

Great Yarmouth Refugee Outreach Support (GYROS)

One Stop Advice & Training Centre

Rhubarb Farm

The Bridge Plus+ Limited

Nature for Health

Belville Community Garden Trust

Gilgal Birmingham

Growing Together Levenshulme

Hope Kitchen SCIO

Jewish Action for Mental Health

Luton All Women Centre Manchester Urban Diggers C.I.C.

North Glasgow Community Food Initiative

Peterborough Asylum and Refugee Community Association (PARCA)

Project Rewild CIC

Suffolk Refugee Support

The Birch Collective CIC

The Recovery Foundation

The Red Earth Collective CIC

Trelya

WETA – Community Services CIC

Partnerships for Health

Amma Birth Companions

> Removed Research Grants as per John's mark up – further comment on hierarchy suggested they should stay, so we can add back in if needed

Impact across Great Britain

Featured project case studies. Click pin to read

> Clusters of current grants across England, Scotland and Wales.

£133 million raised

769,975 people supported

3,598 projects funded

Providing funding and support to **198** grassroots organisations as of October 2024

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Support us

Are you a responsible business? Here's how you can support us:

By working with us as a corporate partner, you will be supporting the UK's most vulnerable people from disadvantaged communities to get the advice and support they desperately need to live a longer, happier and healthier life. We are looking to forge long-term, mutually beneficial partnerships that go beyond the transactional and deliver on the ambitions of both organisations – so if you are a responsible business that wants to drive real change in health inequality, get in touch to discuss how working together can deliver benefits for your company and employees, whilst also delivering significant impact in your local community.

Book a discovery call to find out how you can create a corporate partnership with us.

Are you an individual who cares greatly about improving people's lives? Here's how you can support us:

Whether it's a one-off gift, or a regular donation, you can be sure that every £1 you donate to People's Health Trust goes toward improving the lives of vulnerable people struggling on the sharp end of health equality to get the advice and practical support they deserve. Donate directly via our website and read stories about the people and families we're helping, or you can get in touch to discuss why your support matters, and everything we are doing to reach the thousands of people across the UK that need us now more than ever.

Donate online or book a discovery call to find out how you can become a major gift donor.

Contact:

Dulcie.McDermott@ peopleshealthtrust.org.uk

Donate:

<u>www.peopleshealthtrust.org.</u> <u>uk/support-us</u> **people's health** trust

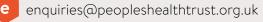
People are dying too young.

Together we can change this.

Support us:

There are many ways you can support our work. Visit **peopleshealthtrust.org.uk/ support-us** to find our more.

t 020 4548 0939 peopleshealthtrust.org.uk





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Additional images from our partners:

ACT CIC: p21, p27 Aspire & Succeed: p35 Centre for Ageing Better: p13 Down Syndrome Cheshire: Front cover, back cover, p18 Health Equals: p28, p30 Living Rent: p9 Savannah Development Foundation, p18 The Vale of Leven Trust: p19, p32