



# Evaluation of the Homes for Health Programme

Summary of findings

April 2026

## Introduction

Poor housing is a major driver of health inequalities across the UK, affecting the wellbeing and life chances of individuals and communities. The Homes for Health (HfH) pilot programme was established by People's Health Trust (PHT) across England, Scotland and Wales to support local people and organisations to address these challenges, by enabling community-led action to improve housing conditions and influence wider systems. Through an investment of over £600,000, the HfH pilot programme provided grant funding over a 21 month period, resources and training to ten funded partners (ACORN – three projects, Caribbean & African Health Network (CAHN), Citizens UK, Community Renewal Trust (CRT), Edberts House, Leeds Muslim Youth Forum (LMYF), Living Rent – two projects)

The evaluation of the pilot programme utilised surveys with tenants and project leads, case study research with projects and interviews with PHT staff and advisory group members. The evaluation was structured in two strands with two respective reports produced: Strand 1 assessed outcomes for tenants and organisations and explored value for money (VfM) and the feasibility of tracking longer-term health impacts; Strand 2 examined programme design and delivery, including capacity-building support and the advisory group's contribution. This summary integrates the evidence from both strands, presenting findings on tenant outcomes, organisational and system change, delivery enablers and barriers, and lessons learnt.

## Engagement and participation

**Reach and participation were a notable success of the HfH programme.** Across the ten funded projects, the programme reached 6,878 tenants against a combined target of 3,185—more than doubling initial expectations. Most participants were social tenants (4,254; 62%) with the remainder private renters (2,464; 38%). Regular engagement (defined as ongoing involvement such as steering groups or committees) totalled 280, below the target of 433.

## Tenant voice, confidence and agency, and increased wellbeing

**Evidence on short term outcomes was strongest for improved tenant voice, knowledge and confidence.** 9 out of 10 project leads in the wave 1 and wave 2 surveys reported a positive shift in terms of tenant voice. Prior to HfH, tenants often lacked clarity on rights and responsibilities and reported being blamed for conditions (e.g., condensation, heating). Projects responded with workshops, clinics and tailored one-to-one support: tenants learned how and when to report issues, how to document evidence, draft letters, escalate complaints, and engage councillors and senior officers. Qualitative accounts show a marked shift from apathy to agency, with tenants, joining action groups, and providing peer support.

**Surveyed tenants rated project involvement highly.** Involvement also reduced isolation; many tenants realised other neighbours faced similar challenges, building solidarity and local pride. These relational gains mattered with tenants describing feeling 'backed up' by their community, which made it safer to assert rights with landlords. One measure of mental wellbeing (GHQ 12) indicated reduced risk of distress and improved wellbeing for tenants at the second survey point. Specifically, the proportion of tenants above the psychological distress threshold fell from 57% to 29%. Interview narratives link these improvements to reduced hazards (especially damp/mould), faster repairs, and the psychosocial benefits of collective belonging and confidence.

## Repairs, landlord practices and housing conditions

**Tangible improvements to housing conditions were secured across projects,** though speed and consistency of results varied. Case studies found examples of completed repairs (roofs, fences, bathrooms, kitchens), remediation of damp and mould, and ventilation upgrades. In several areas, coordinated tenant evidence and

collective pressure unlocked meetings with council heads of repairs and produced visible actions. **Tenants repeatedly stated that resolutions would not have been achieved without project advocacy and organising.**

A further key achievement was a shift from reactive to proactive ways of identifying and responding to housing and health issues. HfH projects helped tenants, staff and partners to anticipate and address problems earlier, improving both the initial response and resolution process. In one case, a project worked with partners on the development of a Good Landlord Charter with the regional mayor's office, which aims to ensure that tenants have secure, well-adapted homes. This proactive culture also enabled tenants and stakeholders to better understand the distinction between personal and structural responsibilities – for example, what sits with tenants themselves versus what requires landlord or council action.

## Leadership, co-production and system influence

Generally, it was too soon for the evaluation to evidence **medium term outcomes** in relation to leadership and influencing systems. A few tenants took leadership roles where projects already used a community-organising model: tenants progressed from attendance to facilitation, public speaking and action-team roles. Elsewhere, foundations were laid (confidence, skills, networks) but progression was slower, constrained by life pressures and the short funding window. On co-production, projects brokered practical outputs (e.g., damp/mould leaflets translated into community languages, pictorial tenancy agreements) and convened multi-stakeholder spaces (e.g., a Healthy Homes conference where statutory bodies adjusted service approaches after hearing tenants directly). Health-system influence was the most difficult area and there was limited impact on wider ecosystems. GP surgeries and other health system partners were harder to engage. Overall, the programme raised awareness and built early relationships, but significant, measurable system change will require longer timescales.

## Value for money

The evidence available to date suggests that **the programme has provided value for money**. While projects experienced some challenges in fully engaging all their target demographic groups, they performed well against most outcomes expected to be seen over the evaluation period. They also developed their own knowledge through participating in the training and networking events the programme offered, and through developing relationships with landlords, agencies and key housing officials have opened new opportunities to discuss the challenges tenants face.

## Learning from implementation

Projects found that while delivery models varied, success depended less on the model itself and more on how well approaches matched tenant needs, their capacity to engage, and the strength of local relationships. Common challenges faced by project teams included longstanding tenant apathy, fear of reprisal from landlords—particularly in the private rented sector—and varying levels of capacity among both tenants and project teams. These barriers often required projects to adapt their plans, shifting from collective action to individual case work, and allowing more time to build trust before encouraging group based activity.

What worked well was sustained, visible presence in communities, personalised outreach, and meeting tenants “where they were,” supported by practical steps such as family friendly sessions, informal events, and rapid responses to enquiries. Trust building enabled stronger engagement with marginalised groups and created space for tenants to share concerns and develop confidence. Projects also played an important connecting role—linking tenants with services, encouraging peer support, and brokering relationships with housing and health stakeholders. Feasible, targeted actions led to tangible short-term successes for individuals and communities, although achieving medium term system-level outcomes will require more time, stronger partnerships, and clearer roles for tenants and delivery partners in influencing wider change.

## Programme support and delivery experience

**Notable strengths** evidenced in the review of the programme's structure and management included **the Trust's flexible and responsive support**, which was widely praised by funded partners for fostering open communication and partnership working. The **capacity building offer**—encompassing training, networking events, and tailored resources—was particularly effective for organisations with limited prior experience in housing, helping to build knowledge, confidence, and practical skills. The programme's scope and expectations were sometimes unclear to a small number of partners and defined geographical eligibility criteria limited reach for some projects. The duration of the pilot was in tension with deeper community engagement, which often requires longer-term investment. The programme **advisory group played a crucial role in supporting the pilot**, providing expert guidance and its diverse membership brought valuable perspectives from across the UK.

## Conclusion

**Overall, the HfH pilot achieved most short-term outcomes and created credible foundations for medium-term change.** It empowered tenants, improved housing conditions in many homes, and was associated with a reduction in psychological distress for some. Organisations grew partnerships and capacities under a supportive, relational funding model. Where impact was mixed—depth of regular engagement, collective action at scale, diversity reach, and consistent landlord enforcement—the constraints were typical of short pilots working in complex systems.