



PHI | Population Health
UK | Improvement UK

and let thy feet
millenniums hence
be set in midst of knowledge

Innovating with people, places and communities

Annual Review 2024-25

Reducing health inequalities through the development and evaluation of long-lasting and environmentally sustainable interventions.

www.phiuk.org





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PHI UK – our first year

Is it enough to ask *what works* to improve population health? How can we also use evidence to ask *what could work* and *what if*?

What does it mean to be healthy? Not just an absence of disease, but a sense of physical, mental and social wellbeing. Not just living longer, but living better, with more years spent in health. Not alone as individuals, but more equally as a society, shaped by the places, systems and structures we inhabit.

Answering these questions means looking beyond clinical solutions, to our homes, our streets, our economic systems and our communities.

It needs bold and imaginative ideas, evidence-informed actions, and wide and deep partnerships. It requires work that can protect and sustain health and equity for decades to come.

Investing in better health

Population Health Improvement UK (PHI UK) was created with these challenges in mind. Born from a £35 million UKRI investment, PHI UK brings together expertise and insight from across research, public health and community organisations.

The UKRI investment is a major component of their *Securing Better Health, Ageing and Wellbeing* strategic theme, which targets a priority challenge through a portfolio of related investments bringing together research disciplines across UKRI.

Taking a wider view

The unifying mission of PHI UK is to discover innovative, inclusive and sustainable ways to improve the health and equity of people, places and communities.

We are pursuing this through an approach that:

- ✦ considers all the interacting parts of how the complex modern world affects our health
- ✦ is driven by data and evidence
- ✦ has an inclusive approach to incorporating different perspectives from across society.

Including all perspectives

Our intention is to develop PHI UK as a growing, dynamic and integrated national community of population health researchers, developing new areas of research, and connecting the network to existing strengths in the UK.

Across our research, we have investigators from more than 35 organisations, and our project partnerships include over 50 organisations.

Our collaborations are bringing together expertise from multiple disciplines and stakeholders: local authorities, public health bodies, the NHS, voluntary organisations, charities, community groups and more. We are also supporting those who typically have not had the chance to apply their expertise to improving population health.

Our research priorities

PHI UK is focused on four initial areas of research, each driven by a consortium of organisations from research, policy, practice and the third sector, addressing separate but complementary challenges. You can read about each consortium's plans and achievements in each section of this report, and meet our leadership team on pages 22-23.

Healthy Urban Places

Examining how population health is affected by features of the urban environment such as walkability, air quality, housing, public transport, access to schools, parks, social and community assets, healthy food, and health services.

Local Health and Global Profits

Understanding how the products and practices of the commercial sector, alongside other building blocks of health, impact on local communities. Using that knowledge to identify, implement and evaluate the interventions most likely to improve health, wellbeing and equity at scale.

Policy Modelling for Health

Developing computer models to estimate how different policies impact people's economic circumstances, and in turn their health. This evidence will help policymakers understand how different groups and places are affected unequally, supporting better policy design and improved outcomes.

Population Mental Health

Creating new opportunities for population-based improvements in mental health across the country, focusing on children and young people, suicide and self-harm prevention, and multiple long-term conditions.



Achievements and ambitions

With this Review, we want to capture the foundations being laid in our first year.

The Review documents the establishment of four ambitious consortia, the development of new partnerships across sectors and disciplines, and the co-production of research, tools and approaches with those who are shaping population health systems.

It also highlights the ways in which our research is already making a difference: influencing regeneration schemes, supporting local authority action, and contributing to national policy development.

From exploring how our cities are designed, to interrogating the commercial drivers of health, to testing policy levers and modelling their effects, to finding more inclusive approaches to mental health, each strand contributes to a richer picture of the systems that shape population health and inequalities across the UK.

Our challenge for the years ahead is to capitalise on the new connections, grow our research capacity, generate useful evidence, and play our part in creating a sustainable future for population health research.



PHI | Healthy
UK | Urban Places

Empowering communities and neighbourhoods

Over one in eight of us live in cities, large and small. These environments present many risks to our health, but how can we seize the opportunities to create more healthy urban futures?

Healthy Urban Places aims to understand how best to harness the power of local urban places as tools to improve population health and reduce inequalities. We are discovering how and why local environments influence population health through interdisciplinary research with communities and partners in Bradford and Liverpool.

Our insights are being shared with stakeholders locally and across the UK and are being actively embedded into policy and practice.

By bringing together communities, researchers and decision-makers in our *Community Collaboratives* in Bradford and Liverpool, we are co-producing insights and priorities about what makes a healthy place.

We have unrivalled data infrastructure: the **Born in Bradford** and **Children Growing Up in Liverpool** birth cohorts, and population-linked datasets of **Connected Bradford** and **Liverpool City Region Civic Data Cooperative**.

These tools enable us to measure and understand how different places affect people's health and show where health differences between areas are most noticeable. And they will allow us to co-develop and evaluate a range of place-based interventions.



Building the team

In our first year, we have built our research team, underpinned by the principles of team science and collective leadership. We have fostered inclusive ways of working and created opportunities to enhance career development for researchers.

In our wider team beyond academia, we have focused on capacity building with professional stakeholders and community representatives. For example we have run bespoke training workshops on creative and immersive methods, and our Healthy Urban Places Seminar Series has provided a popular forum for learning and knowledge exchange.

Our partnerships with community-based organisations are being formalised through our Community Collaboratives, where research will be co-produced alongside community researchers and members.

“We're working with local partners to understand what makes a healthy city, and to develop and evaluate interventions to test this in a period of rapid urban change.”

Developing our science

Using our environmental and health datasets we have developed methods to understand spatial variation in exposures and health outcomes. This has included mapping changes in exposure to gambling outlets over the past decade, and examining the impacts on people when they move to or from areas with different health risks in the environment.

Our environmental exposure dataset is being expanded to include important influences identified by researchers and our communities – including crime rates, street safety, and safe green spaces.

Working closely with NHS England, we are supporting the linking of health and environmental data to enable the creation of dataset that scientists across the country will be able to access for their research.

Informed by two reviews on causal pathways we have undertaken, we have also been developing methods to model the long-term health impacts of place-based interventions.

Engaging for change

Through engagement with local stakeholders and community members in Bradford and Liverpool, we have identified four focus areas in each city with different environmental, historical, cultural and political characteristics.

We have begun to explore how high streets in each area have evolved to shape the characteristics of the areas as they exist today.

Collaborating with local partners, we are informing and planning evaluations of place-based interventions. These include:

- Providing evidence on the potential health benefits of the proposed Southern Gateway Regeneration scheme in Bradford (see pages 8-9).
- Evaluating low-traffic neighbourhood and housing upgrade schemes in both Bradford and Liverpool.
- Developing plans for the evaluation of Liverpool's active travel social prescribing programme.

These collaborations have enabled us to secure further funding, including £1.7 million for the Healthy Homes study to evaluate the impacts of a retrofit programme in Bradford, support to explore AI solutions for urban health, and further evaluation of Bradford's Clean Air Zone.

Responding to stakeholder priorities, we have provided evidence briefings and contributed to round table discussions and scientific advisory meetings on healthy urban places, including regional combined mayoral authorities, Executive Agencies and UK government departments.

Laying the foundations for health in Bradford's Southern Gateway Regeneration

Healthy Urban Places is collaborating with local and regional partners to influence plans for major regeneration within Bradford in a way that prioritises health and equity.

In partnership with Bradford Council and the Ministry of Housing, Communities and Local Government, Healthy Urban Places is laying the foundations for the health and economic evaluation of the Southern Gateway Regeneration.

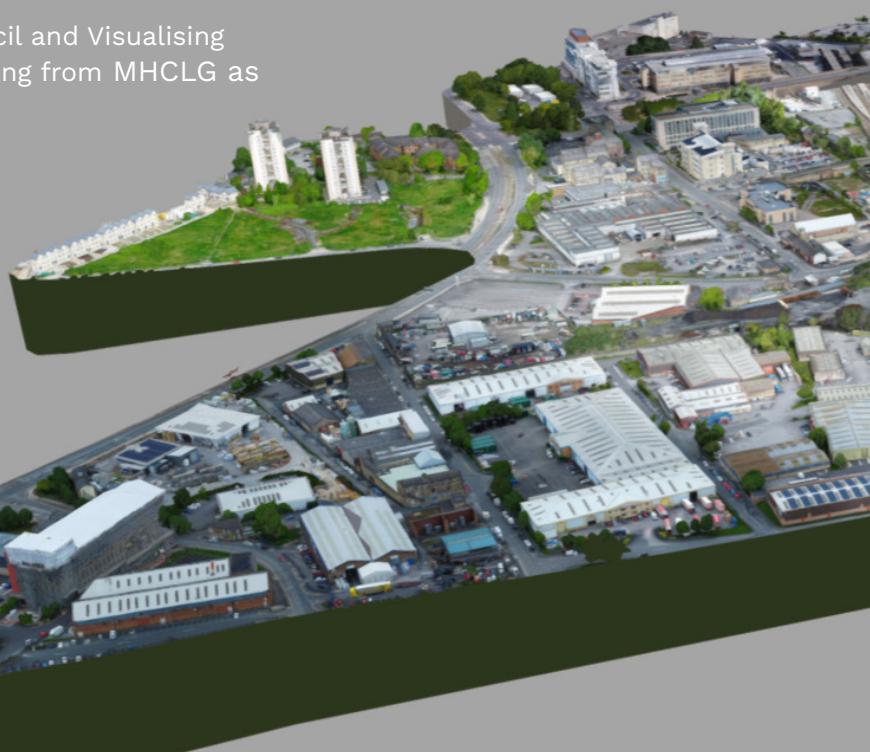
This includes contributions to the Strategic Outline Business Case and ensuring local communities have a strong voice in the development of plans. We are doing this in the following ways:

- We are developing a living Theory of Change. This illustrates the multiple pathways to health from the proposed regeneration and new train station. The model considers short, medium and long term impacts, with plans to estimate the economic and health effects.
- We are providing evidence summaries and recommendations to boost the potential for health co-benefits from the regeneration. This will draw on existing Bradford data and relevant research.
- We are engaging with residents in the Southern Gateway area, who are typically under-served. We are gathering their perspectives on the regeneration and the new train station proposal. We have identified a clear need for improved transportation and infrastructure that connects communities.

We will continue to actively contribute evidence and insights to shape the master plan and business case and are determined to ensure that the Southern Gateway becomes a thriving and healthy urban place.

A 3D model of the Southern Gateway Area

City of Bradford Metropolitan District Council and Visualising Heritage / University of Bradford, with funding from MHCLG as part of PropTech 4 scheme.



What is the Southern Gateway Regeneration?

In autumn 2023, the Government announced Network North. This includes a £2bn investment for a brand-new rail station and line connection for Bradford, and an additional £2.5bn for a new West Yorkshire mass transit system, improving connections between Leeds and Bradford, Huddersfield and Halifax.

The area around the proposed rail station in Bradford is known as the Southern Gateway. Currently largely industrial and situated between major highways, this area is earmarked for regeneration, with proposals for 5000 homes, cultural venues, and commercial venues.

Regeneration would unlock Bradford's huge economic growth potential, vastly improving rail connectivity and expand Bradford's city centre to the south. It could provide a transformational change in making Bradford a healthier and happier place.

For example, it promises to provide high-quality, affordable housing, improve public and green spaces, and reduce pollution levels across the district.

The Department for Transport are leading on the development of a Strategic Outline Business Case to Treasury for the new station, which is expected to be submitted by Winter 2025/26.

Bradford Council are currently working to develop a master plan for the wider Southern Gateway Area. Healthy Urban Places is working closely with all partners to ensure that health co-benefits of the potential investment are maximised.

www.southerngateway.co.uk



Protecting people, places and equity

Businesses help grow the economy and add to communities, but some also produce and promote unhealthy products. How do we make sure that we find a healthy balance between people and profit?

Commercial activity impacts on our individual and collective health. Local businesses create jobs, provide products and services we depend on, and contribute to our communities.


However, many large multi-national companies also manufacture and promote unhealthy products and lobby against the introduction of public health policies. The profits they make are often extracted from communities rather than invested in them.

To improve population health and reduce health inequalities, we need to understand the effects of commercial activities, both positive and negative.

Our aims

The aim of Local Health and Global Profits is to develop, implement and evaluate population-level actions to tackle the negative effects of commercial activities, and drive improvements in health and reductions in health inequalities.

To achieve this, it is first necessary to better map and understand the systems that effect communities' health.



“We need to better understand the Commercial Determinants of Health – the systems, practices and pathways through which business impacts on health and equity.”

Many things influence our health, such as our homes, social connections, how we travel, the food we eat, and our access to green spaces. In population health research we call these 'determinants'. While these social and economic influences of health are familiar to many, the commercial influences are less widely understood.

Local Health and Global Profits is examining all the major building blocks that impact on health, with a particular focus on commercial determinants. We define Commercial Determinants of Health as 'the systems, practices, and pathways through which commercial actors drive health and equity'.

By understanding the interaction of all these building blocks, we can build a better picture of both positive and negative impacts - and possible actions.

Our activities

Local Health and Global Profits is made up of seven different areas of work that all contribute to:

- developing the evidence, tools and data on commercial, social, political and economic factors that influence health and wellbeing at local level
- identifying, implementing and evaluating the effective population-level actions, with a focus on learning from previous local authority actions
- developing and sharing the knowledge and resources to support other local authorities in the future.

Our team

Our consortium brings together researchers at the Universities of Bath, Cambridge, Edinburgh, Sheffield and the London School of Hygiene and Tropical Medicine.

We also work in partnership with local governments, local populations, public health practitioners including the Association of Directors of Public Health, and civil society organisations including Centre for Thriving Places, Action on Smoking and Health, Obesity Health Alliance, and Alcohol Health Alliance.

Foundations for change

This year we have been establishing the management and governance structures for the research project to run efficiently. We have also recruited a multidisciplinary team of researchers, including three PhD students.

Our research team is working to create an overarching 'system map' of all the factors that impact on the health of local communities. Through this, we have identified the interactions and relationships between different factors that affect population health. This will help local authorities to identify which actions to focus on to improve health.

In parallel, researchers have reviewed published academic literature to identify the actions that local authorities could take to address commercial activities that negatively affect health.

We are drawing on the knowledge and experience of local authority professionals to inform our research. Through a large series of individual interviews, we have gathered insight to identify the barriers to introducing local health policy, particularly to combat negative commercial activity, and what can help these policies to be implemented more easily. This interview data is being analysed and, through work with public health experts, will be used to identify and develop the types of tools and resources that can be used to shape policy and implement interventions at a local level.

The year ahead

During the coming year, Local Health and Global Profits will be working more closely with a number of local and combined authority areas to identify and implement actions to support local health improvement.

Alongside this, the research team will develop a suite of resources and tools to support changes that can improve health at a local level.

Building knowledge and capacity

Knowledge can only make an impact by being shared and used. In our first year, Local Health and Global Profits has been focusing on creating connections and expertise to apply our research to pressing policy problems.

This year, we have been working with the academic community, public health professionals and local authorities to build an understanding of the commercial determinants of health.

Adding to research

The team has published 13 research papers on topics including industry influence on public health policy, public health and urban development policy, and learning from tobacco control to tackle gambling industry harms. This research contributes to the knowledge base and raises the profile of commercial determinants of health.

Events and seminars

We have held a series of events, including face-to-face engagement events and webinars for those working in local authorities. And our staff have participated in a wider series of conferences, meetings and events.

Through these opportunities, we have explored the range of factors included in commercial determinants, and spotlighted examples of actions taken by public health teams to address negative impacts.

From local to national

A key element of our project is knowledge exchange – sharing evidence and insight gathered through our research to inform public health policy and practice.

Local Health and Global Profits has used its research expertise to respond to three national policy consultations, highlighting the importance of addressing the commercial determinants of health in the NHS 10-Year Plan, the National Cancer Plan and the Soft Drinks Industry Levy Review.

We are continuing to provide information to the Treasury for the Soft Drinks Industry Levy Review, developing the research evidence base to drive policy change and improve health.

“The best use of an hour this month without a doubt.” – Public health attendee at an LGHP webinar.



LHGP – a year in numbers

350

Webinar attendees

at two online events exploring the commercial determinants of health



76

Staff and stakeholders

attending our two engagement events



37

Interviews

conducted with local authority professionals



33

Presentations

and speeches given at academic conferences



13

Research papers

contributing to advancing knowledge and discussions in the field



8

Policy influences

through media interviews, policy consultation responses and more



2

Research prizes won

by early career researchers





PHI | Policy Modelling
UK | for Health

Empowering evidence-informed action

There are many possible futures for population health. How can we use the latest in computer modelling and integrated policy partnerships to shape a healthier and more equitable way ahead?

Policy Modelling for Health is developing advanced computational models that estimate the population health and health inequalities consequences of proposed and potential policies.

The focus are policies that affect households' economic wellbeing, for example through taxation, welfare, pensions, inheritance, or work.

Making the most of advances in computational modelling and building on prior research, our models “pre-test” potential and planned policies, enabling policymakers, advocacy groups, and communities to understand the likely health benefits and harms, and their distribution across society.

Year one: maps and plans

Our first year focused on staff recruitment and training, partnership building, prioritisation of focus areas, and technical developments. Here are five key areas of progress:

Building our collaborative network

Our consortium comprises a multidisciplinary team of ten organisations:

- **In academia**, the Universities of Glasgow, Strathclyde, Leeds, Sheffield, Essex, and Birmingham.
- **In policy**, Greater Manchester Combined Authority, West Midlands Combined Authority, Glasgow City Region, and Public Health Scotland.



These partnerships are enabling the integration of academic research with policy development, and ensuring our models are both scientifically sound and practically applicable. Regular meetings – in-person and online – have aligned our goals, shared insights, and set a strong shared sense of direction.

We have recruited a full complement of researchers, including Embedded Researchers working directly within our policy partner organisations, and invested in substantial interdisciplinary skills development.

Reviewing the literature

Our literature reviews are already shaping our approach. We explored “What makes a ‘good’ model?” to identify and bring together criteria for assessing how appropriate and useful a policy simulation model designed to support decision-making processes is. Another review looked at public involvement in policy modelling research. These insights are feeding into our modelling and community insights work packages.

We have also submitted a conceptual paper examining wealth as a key factor influencing health and inequality, which is currently under review.

Understanding policy landscapes

To ensure our work addresses real policy needs, we have formed dedicated working groups. Through one-on-one interviews and group discussions, we have identified five policy themes that matter most to our partners and the communities they represent:

- **Wealth and debt**
- **Economic inactivity due to ill health**
- **Good work**
- **Housing**
- **Skills**

Understanding these focus areas guides how we shape and adapt our modelling efforts.

Planning the modelling work

We held five computational modelling workshops to discuss what data innovations and model adaptations are needed and feasible to answer the key questions raised by policymakers.

These sessions helped us prioritise developments, and we have begun implementing them – creating workflows that link policy partner interests, question formulation, and pipelines for model adaptations.

Technical developments

A major technical milestone was the updated release of our **SimPaths*** model in December 2024. Improvements include a range of modelling innovations and a refreshed synthetic population – a simulated “artificial” population that reflects as many of the key attributes of the real population as possible. This draws on the latest census and household survey data to accurately represent households to allow modelling of tax and benefit changes.

We also explored new data sources and developed a statistical analysis plan to explore how wealth shapes health outcomes.

The view ahead

In our second year, we will pursue further synthetic data innovations to represent the distribution of wealth and assets, as well as health outcomes. Model refinements will focus on mapping the pathways from policy to household income and wealth effects and on through to health impacts.

Our community insights and societal preferences work will commence, and we will publish initial findings and host webinars on key policy topics.

By combining technical excellence with community insights and policy engagement, we are committed to developing evidence that helps to shape smarter, more effective health policy across the UK.

Impact through collaboration

In our work to improve population health, the Policy Modelling for Health Working Groups are bringing together decision-makers and thought leaders to help shape and strengthen our modelling approach.

Policy Modelling for Health has one powerful aim: to ensure that the models we build are not just technically robust but genuinely useful to policymakers.

This ambition is supported by the input of two dedicated Working Groups, who meet every six months to provide valuable feedback to our academic teams.

Policy insight

Our **Policy Working Group** brings together key public sector organisations including:

- Scottish Government
- Welsh Government
- Department for Work and Pensions
- Ministry of Housing, Communities and Local Government
- Department of Health & Social Care Office for Health Improvement and Disparities
- Public Health Wales
- Public Health Scotland
- Glasgow City Region
- West Midlands Combined Authority
- Greater Manchester Combined Authority

This group ensures that the team are up-to-date with live and emerging policy priorities across national, devolved, and regional government levels.

Thinking differently

Our **Think Tank and Advocacy Working Group** is designed to bring a perspective on the evidence needs and evidence use practices of NGOs and includes representatives from:

- Resolution Foundation
- Health Foundation
- Wellbeing Economy Alliance Scotland
- Joseph Rowntree Foundation
- New Economics Foundation
- Centre for Progressive Policy
- Institute for Government

This group brings exciting new ideas that enable us to gain a different, future-oriented perspective on policy issues, pushing the conversation beyond what is currently in scope to consider desirable, often ambitious, future policy options and directions.



Making sense for everyone

Since launching in October 2024, each group has met twice. Our inaugural meetings were a chance for everyone to learn about the research programme and be introduced to policy modelling and the data and modelling infrastructures that we build on in our work.

We ensured that our overarching themes resonated with the group members and discussed prioritisation of potential focus areas. We also introduced our plans for democratising models by eliciting, and where possible incorporating, lived experience perspectives.

Good computational models

The most recent discussions, held in April 2025, have provided an opportunity for the Working Groups to feed into our ongoing work on “What makes a ‘good’ model?” for policy use.

Group members offered views on the importance of clear model purpose, and methods for building consensus and exploring trade-offs, as well as practical support for identifying interviewees for next-step work. Their feedback on our mapping of policy levers and their help in defining our priority questions has already shaped our work.

As the programme evolves, these Working Groups will continue to make sure our work is based on a sound understanding of current policy needs and practice, whilst ensuring scope to consider innovative policy proposals that go beyond the status quo.

Their guidance helps to guarantee our models do not just reflect today’s policy landscape, but serve to shape a healthier, more equitable future.



Equity through partnerships, data and policy

Mental health support can often be too little too late for too many people. But what if, through wider partnerships and smarter innovation, we could do more to prevent mental health challenges arising in the first place?

One in four adults experiences at least one diagnosable mental health problem in any given year, and mental distress and ill health are associated with significant disability, sickness absence, unemployment and suicide attempts.

In the last year, Population Mental Health has been establishing the foundations for transformative change in how we understand and improve this situation.

Our consortium has brought together researchers, policymakers, community members, and people with lived experience to create new ways of turning evidence into action.

We are a team from eleven organisations: Birmingham and Solihull Mental Health NHS Foundation Trust, Black Thrive Global, Mental Health Foundation, Middlesex University, Swansea University, University of Manchester, Traumasclapes, Thrive LDN, Ulster University, King's College London, and University College London.

This interdisciplinary collaboration is generating innovative research methods and community-centred approaches that are reshaping the landscape of population mental health. We are creating a network committed to reducing mental health inequalities and improving mental health and wellbeing for all.



Action with insight

This year we have made significant progress in building sustainable collaborations. At each stage of our research, our work is guided by scientific and community insight:

- ▲ Our **Scientific and Policy Advisory Board** provides crucial guidance on our prioritisation methodology, emphasising the importance of anticipating policy developments and maintaining our commitment to tackling inequalities.
- ▲ Our **Community Insights Panel** includes panel members from a wide range of backgrounds, ensuring that lived experience perspectives inform every aspect of our work. This represents a fundamental shift toward research that is genuinely community-led and responsive to real-world needs.
- ▲ The development of an interdisciplinary **Implementation and Impact Sub-committee** will ensure the consortium is focused on generating actionable insights and creates sustainable changes in the public mental health landscape.

Inclusive research

We are also embedding Equality, Diversity and Inclusion in all our work. This involves exploring how teams address systemic inequalities, power imbalances, and historical exclusion within population mental health.

This commitment is also reflected in our approach to measuring intersectional inequalities. Two new postdoctoral researchers are leading pioneering work in this area: one focusing on a peer-led photovoice project that captures the experiences of under-served communities, and another developing interactive mapping of place-based inequities.

Our commitment to reducing inequalities in suicide and self-harm is further demonstrated through our comprehensive umbrella review of published systematic reviews examining evidence for restricting access to means of suicide. This work provides critical evidence for interventions that can save lives while addressing the inequalities that make some communities more vulnerable than others.

Data for change

Our team have begun ground-breaking working using a first-of-its kind dataset linking South London and Maudsley mental health records with benefits data from the Department of Work and Pensions. We will use this data to aid our understanding of relationships between accessing the benefits system and mental health outcomes, as well as investigating impacts of welfare reforms, providing crucial insights into how social policy directly impacts mental health.

Our collaboration with the Strategic Investment Board in Northern Ireland has led to the development of an application for projects examining neighbourhood investment and mental health outcomes using neighbourhood-level data. This partnership demonstrates how our work can inform investment decisions that improve both economic and mental health outcomes.

We are examining children and young people's mental health using ECHILD – whole-country national pupil-level data linking schools with health records. This work represents a significant step forward in understanding young people's mental health needs.

Generalisable innovation

In all, the team has published 11 research papers about topics impacting mental health, including neighbourhoods and environment, addressing stigma and inequalities, community-based interventions and social determinants of mental health, data-driven approaches and policy evaluation, and co-design and user-centred approaches in mental health services.

All our work is also underpinned by a rigorous Theory of Change, which is currently under review for publication. This foundational document will help other researchers and policymakers understand and replicate our innovative approaches to population mental health improvement.

Navigating future landscapes

As we plan for the future, Population Mental Health is creating new opportunities to share our learning and be guided by real world needs.

Insights of the roundtable

Our first policy roundtable in January 2025 brought together over 70 participants from central and local governments, public sector agencies, and the private sector. People with lived experience led parts of the programme, ensuring discussions remained grounded in real-world perspectives.

The roundtable emphasised the critical need for an integrated approach to population mental health that combines evidence from various sectors, includes lived experiences, and focuses on prevention.

“Congratulations on such a brilliant and well attended event.” – Policy roundtable attendee.

This engagement has yielded tangible results. We have established regular meetings with:

- ▲ Government departments including the Office for Health Improvement and Disparities (OHID), Department for Work and Pensions, the Department for Science, Innovation and Technology and the Cabinet Office
- ▲ leaders and decision-makers from local authorities including London, Greater Manchester and West Midlands
- ▲ the Association of Directors of Public Health (ADPH), and the Health Determinants Research Collaboration (HDRC)
- ▲ charities, civil society and those with lived experience.

This is creating bi-directional, ongoing engagement that ensures our research can directly inform policy development.

Complexity meets creativity

We held our first ‘sandpit’ in March 2025. Sandpits are interactive workshops designed to foster creative collaboration and problem-solving. This event demonstrated the power of collaborative innovation.

About 35 participants formed cross-sector teams to tackle built environment challenges, with three teams receiving funding of up to £10,000 each for groundbreaking projects:

- ▲ **How the built environment impacts and shapes loneliness and mental health** – exploring the connection between physical spaces and social isolation.
- ▲ **Perceptions of urban, environmental mental health** – understanding how city environments affect psychological wellbeing.
- ▲ **Suicidality and the London Underground** – addressing critical safety concerns in urban transport systems.

Showcasing our research

Over the last year, we have hosted and participated in numerous events, meetings, conferences, and webinars. These engagements have allowed us to showcase the consortium, demonstrate our ability to support national, regional, and local health priorities, and engage with key processes in policy and practice.

Through these opportunities, we’ve also gained deeper insights into the many factors influencing population mental health and highlighted effective actions that accelerate prevention and improve health, ultimately supporting a shift towards a more preventative model.

No health without mental health

Population Mental Health showcased at King's Health Partners' Annual Conference

In September 2024, over 600 people from around the globe joined King's Health Partners' Annual Conference.

The conference focused on how partners are addressing health inequality and working to achieve health equity across the system, through advancements in research, healthcare, education and technology.

Speaking to their theme of 'no health without mental health' were Population Mental Health Co-directors, Professor Jay Das-Munshi and Dan Barrett. Watch their presentation on YouTube: <http://tiny.cc/rm5n001>



Training the next generation

We have nearly completed our comprehensive mapping of current UK population mental health training provision, providing a foundation for addressing gaps and building capacity.

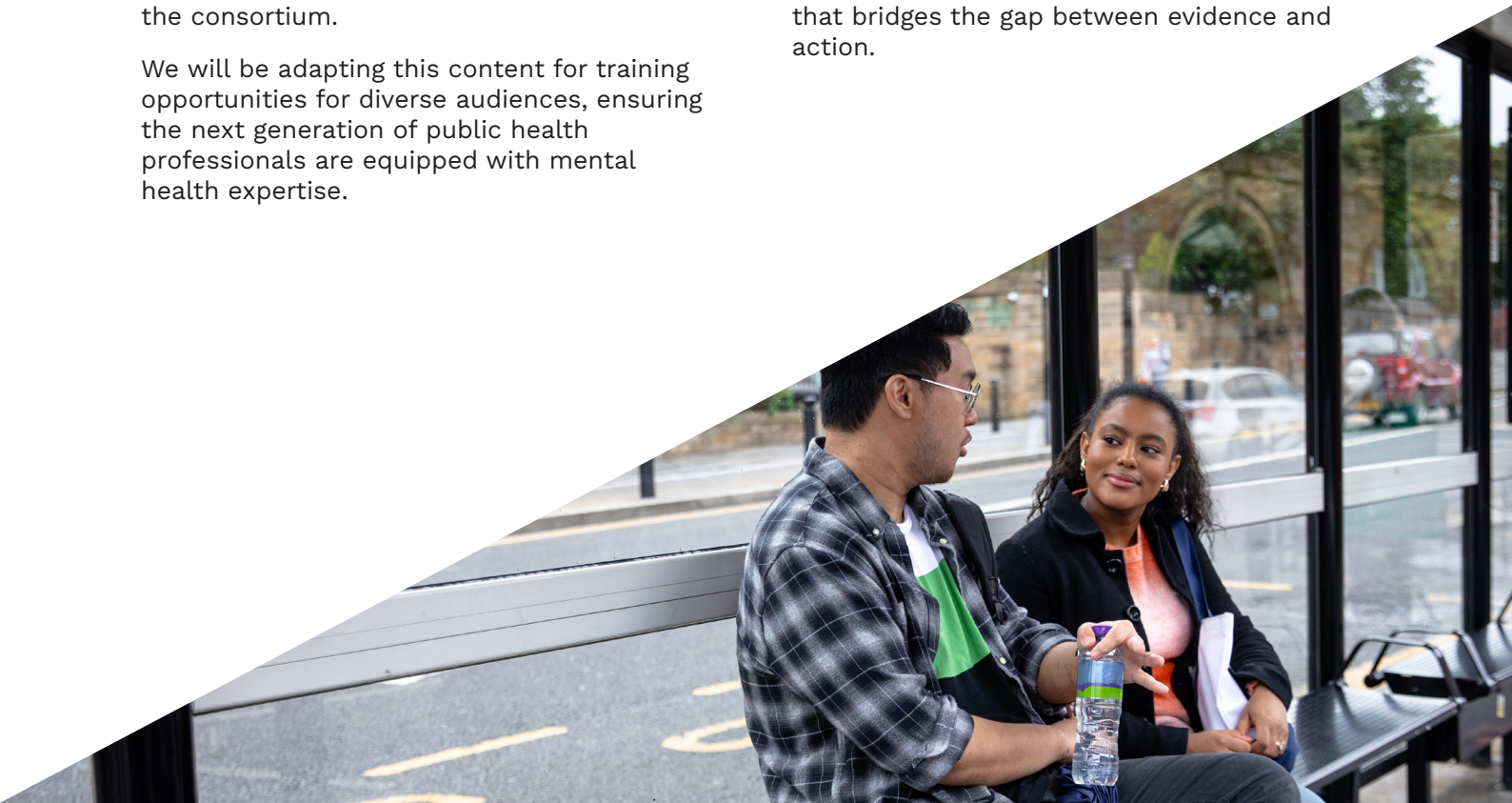
Our development of a new Public Health and Mental Health module for an MSc Public Health programme is now being delivered to students, including contributions from across the consortium.

We will be adapting this content for training opportunities for diverse audiences, ensuring the next generation of public health professionals are equipped with mental health expertise.

A vision for continued impact

As we move into the second year of Population Mental Health, we build on solid foundations of community engagement, policy partnership, innovative methodology, and academic excellence.

Our work demonstrates that meaningful change in population mental health requires sustained collaboration across sectors, genuine community leadership, and research that bridges the gap between evidence and action.



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