




ActEarly City Collaboratory Workshop

24th September 2020 | 11.00-13.45 via Zoom

WORKSHOP REPORT



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#ActEarlyBradfordWorkshop



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PROGRAMME

The workshop will be via Zoom and in three stages, the first will be a welcome session and update, the second will be the breakout workshops by ActEarly theme, and the third will be a summary of the day and our next steps.

In the theme breakout sessions we plan to explore:

- 1) Selection of interventions – partner-led, natural experiments or simulation studies
- 2) Design of co-production and evaluation
- 3) What outcomes are important to measure

Members of the Evaluation and Co-production groups will be present in each of the theme breakout sessions.

The joint ActEarly Board and ActEarly Scientific Advisory Group (ASAG) will be held at the same time as the breakout sessions.

TIMETABLE

Session 1

11.00	Welcome	<i>John Wright</i>
11.05	Tower Hamlets update	<i>Will Tuckley</i>
11.10	Bradford update	<i>Kersten England</i>
11.15	Mapping ActEarly	<i>Phil Garnett</i>
11.25	5-minute lightning talks	<i>ActEarly Theme & Group* Leads</i>
11.45	Bromley by Bow and ActEarly co-production	<i>Bromley by Bow Centre</i>

Session 2

12.10	ActEarly Theme breakout sessions:	
	- Healthy Places	<i>Nicola Christie/Rosie McEachan</i>
	- Healthy Learning	<i>Mark Mon-Williams</i>
	- Healthy Livelihoods	<i>Kate Pickett/Claire Cameron</i>
	Joint ActEarly Board /ASAG meeting	<i>Kersten England / Debbie Lawlor</i>

Session 3

13.25 – 13.45	Showcase	<i>John Wright/Trevor Sheldon</i>
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**Evaluation; Healthy Places; Healthy Learning; Health Livelihoods*

Session 1: Opening Session

Welcome from John Wright, ActEarly Co-Director

The last 8-9 months have highlighted the urgency of what we are doing in ActEarly. COVID-19 has put a spotlight on inequalities and especially how stark they are in both Tower Hamlets and Bradford. ActEarly is tackling adverse outcomes in these communities through collaboration, addressing comorbidities and non-communicable diseases (e.g. obesity, cardiovascular disease, etc.), and by addressing the wider social determinants of health. We have had some recent changes, Andrew Hayward is now focusing on COVID-19 research and his role with the SAGE Committee, Professor Trevor Sheldon has taken over as our new Co-Director following his move to Queen Mary University of London (QMUL) and will be leading ActEarly in London. The idea from UKPRP was to develop consortiums, to bridge the divide between biomedical research and preventive research, to build partnerships across institutions. ActEarly connections have been established between Leeds, York, and Bradford, as well as UCL and Queen's Mary, and our local authorities and wider partners.

Update from Tower Hamlets, Will Tuckley Chief Executive Tower Hamlets Council

ActEarly is a good example of collaboration between local government and the academic sector. We can adapt the research agenda together and make sure that the research program reflects the priorities of the Council and our day-to-day issues. Local government lacks evidence to guide spending and to understand the impact on communities, but ActEarly has the capacity to provide this. In Tower Hamlets, the focus is on liveable streets and healthy school streets, as well as a healthy impact assessment policy. All are embedded in ActEarly and through these interventions, we can ensure we are having an impact and addressing disadvantaged populations. James Thomas is our new Children's Corporate Director and is very enthused about the emphasis on prevention and working with young people. ActEarly is a dialogue and is a collaboration. There is still work to do around ActEarly and what it might look like in Tower Hamlets, COVID-19 has delayed this, but this is a good chance today to move forward.

Update from Bradford, Phil Witcherley (representing Kersten England, Chief Executive Bradford Metropolitan District Council)

Great progress in ActEarly collaboration and projects over the last year has been made, for example:

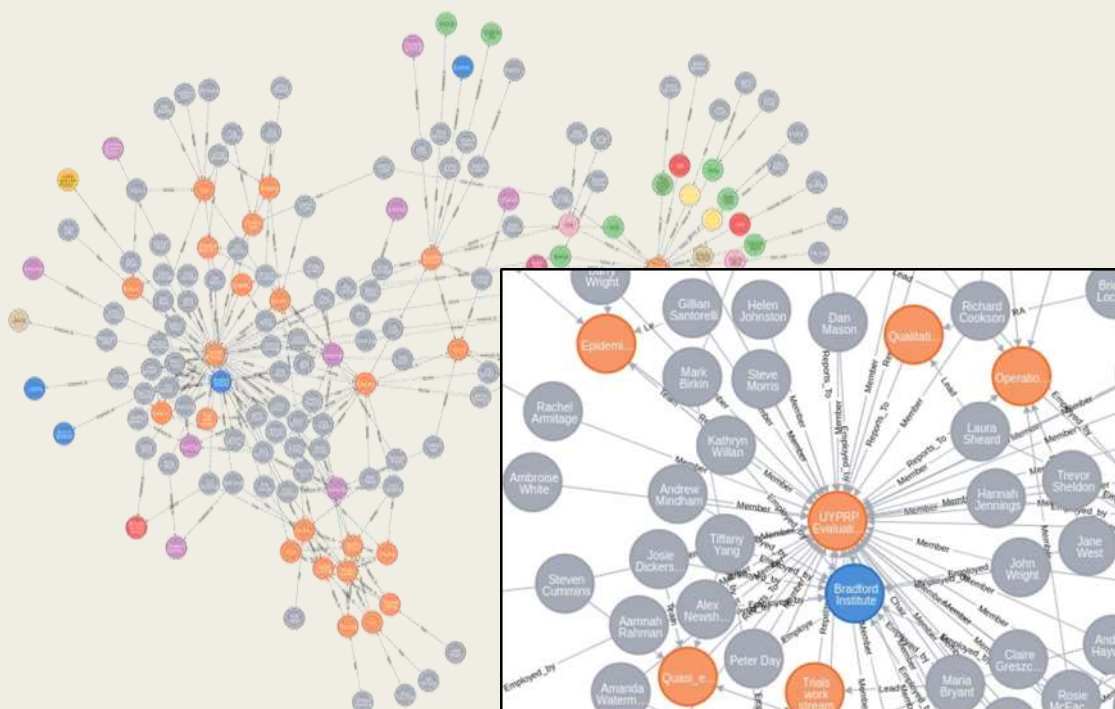
- CSAG, the COVID advisory group: has helped create an evidence-based response to COVID-19 in Bradford, by showing social, economic, and health impacts of the pandemic on various communities
- Work on air quality: has helped secure funding from the government for working on our Clean Air Zone
- ActEarly: Holme Wood: Mark Mon-Williams has pioneered this work focusing on a disadvantaged area of Bradford; he has brought data scientists, local leaders, and our community together to work to develop intelligence, interventions and evaluations to improve the lives of those growing up and living in Holme Wood.
- Data sharing: Rob Shore has joined my team to work on data sharing, linkage and management, and to facilitate collaboration between researchers and policymakers. His post is funded by the NIHR Clinical Research Network to support the ActEarly consortium.

Philip Garnet: Update on Complex Systems Mapping Project

A mapping project has been conducted to visually depict the ActEarly network, to get a sense of the different parts of the project and how members work together. The core people of the project have been mapped, as have subgroups, partner organizations, and the relationships between them. Briefly, the evaluation theme within the map shows everyone in that theme is connected, strategic partners are linked by particular people, but there are some partners that stand alone. This is developing and dynamic, and the project will need to think of ways for people to easily add additional data and how to represent the way the project

interfaces with the different local communities involved. We expect the map will be accessible to most via a web browser, and the data will be presentable in different ways, such as by using a spreadsheet.

Figure 1 ActEarly Consortium System (Phil Garnett)



5 minute lightning talks:

Healthy Places (Nicola Christie & Laura Vaughan)

The Healthy Places team is working together to evaluate interventions aimed at creating indoor and outdoor places that support healthy behaviours. Collaboration has been key in particular developing relationships with Bradford, Tower Hamlets, and partners such as those involved in London transport. COVID-19 has exacerbated some issues related to health and the built environment (e.g. less social contact, reduced opportunities for children to play outside). But it has also created new opportunities e.g. to evaluate space reallocation in cities for walking/cycling, and using pedestrian modelling to find the best place to site COVID test centres in Tower Hamlets. Some interventions taking place so far in our theme include:

- Liveable Streets
- Healthy School Streets
- Health & Place Intervention Evaluation tool - this measures objective and subjective wellbeing and mobility linked to the built environment
- Healthy Impact Assessment

Other opportunities include:

- Housing interventions (there is a lack of detailed data) and how housing relates to health
- Work on issues related to recovery and mobility after COVID-19

Healthy Learning (Mark Mon-Williams)

There are 5 different areas of focus for Healthy Learning in Bradford:

1. School support for schools trying to get children back in the education system safely (e.g. webinars from medical experts have provided question/answer sessions for school leaders. Schools have reported positive feedback and feeling less isolated)
2. Addressing the digital divide, food insecurities, and inequalities in the classroom (e.g. a joint webinar with Stanford University delivered)

3. Supporting schools around mental health (e.g. the Mental Health Trailblazer project in Bradford)
4. Early identification of children with autism (e.g. using routine data to identify which children are at risk)
5. Aiming to develop an electronic vulnerability index (e.g. using routine data to identify children who are vulnerable but have not yet met the threshold to qualify for support)

Different action projects are now being run:

- JU:MP team is supporting children to be more physically active in schools.
- Food cross-cutting theme is doing work around nutrition and obesity
- Projects providing tuition
- Parental engagement project

Healthy Livelihoods – (Kate Pickett)

One aim of Healthy Livelihoods is to improve families' incomes in order to bring up their children. Work will progress on universal basic income and embedding welfare and benefits advice. Claire Cameron has worked on improving uptake of the 2-year old offer for early childhood care in Tower Hamlets, and two COVID-19 UKRI applications have been successful:

1. Families in Tower Hamlets: looking at impact of COVID on work and care for families with young children
2. Born in Bradford 2020 Family study: understanding the impact of COVID on pregnant women and new parents

Community service mapping in Tower Hamlets is now taking place and the Learning theme has worked with colleagues within Tower Hamlets and Bradford Local Authorities who are leading on poverty policy, to identify new interventions that have been developed in response to COVID-19 and require evaluation. Two of these have been identified:

1. Food scheme in Tower Hamlets
2. Bradford-based credit union loan and grant scheme

Program Evaluation (Maria Bryant)

One of the objectives of the evaluation group is to have a core dataset of outcome measures that work across ActEarly evaluations. The team has explored datasets from Tower Hamlets and Bradford and sought the views of community members, local authorities and researchers. The next step is to decide which specific measures to focus on. The workshop attendees have been sent a survey link to a survey where they will be able to select the outcomes they feel are most important. More in-depth support is being provided for projects within the core themes.

Community Engagement and Co-Production (Naomi Mead & Pratima Singh from the Bromley By Bow Centre (BBBC))

There was a need for a new platform to engage with the Tower Hamlet community due to COVID, so the team set up a website and Facebook group to support parents with educational and play resources. The BBBC team has focussed on partnership and collaboration and worked with 10 different organizations to provide online content and play packs to families. Work has been undertaken to develop a stronger community research base. The "Have Your Say" survey was introduced, as well as a community podcast and magazine. Community members created bunting with art related to theme of what would make the community happy and healthy. Other community feedback has been gained via additional art projects.

Our learnings, reflections, and next steps:

- Relationship between physical and virtual connection
- Constant changes were required for timelines and methods, and the team had to constantly reflect on safety measures related to COVID
- Focus now is on where there are gaps in community engagement and co-production and the next best steps to address the gaps

Session 2: Theme Breakout Sessions

Healthy Places

Objectives were to discuss:

- A selection of interventions
- Co-production and evaluation design
- What outcomes are important to measure

The Places theme has advanced in evaluating the liveable streets program and healthy streets program. Other potential interventions for which ActEarly resources could be used were discussed:

1. Low-traffic neighbourhoods interventions in London
 - There is a lack of evidence on their effectiveness, and potential for reducing (or increasing) inequalities related to air pollution exposure.
2. Green infrastructure projects:
 - In Bradford green infrastructure projects continuing
 - Healthy streets initiative in Shipley is starting
 - Work on air quality is beginning, the plan for a clean air zone has progressed and more funding has been received from NIHR for evaluation.
3. Street space allocation intervention:
 - TFL are doing a London-wide exercise via survey on public perceptions about low-traffic neighbourhood schemes. A data sharing agreement with Tower Hamlets is being set up for access to data to understand the consultation phase of the low-traffic neighbourhood interventions

Discussion and support for a proposal to see if the approach in Tower Hamlets could be adopted in Bradford. Notes on tools and approaches will be shared across the Places team. What outcomes are important to measure impacts on deprived communities was discussed.

Some interventions were presented:

1. Fresh food voucher project, led by Queen Mary's team:
 - Project provides household vouchers to improve fruit and vegetable consumption. A 42 month study is rolling out
 - Links with the QMUL team and Maria Bryant and food systems within Bradford.
 - Where people obtain food and where they live discussed
 - Evaluation discussed - challenge is to get at least a 50% response rate from the intervention and control groups at baseline and 2-year data on diet quality
2. New cycle routes in Bradford:
 - Evaluation planning needed for this
3. Physical activity in Bradford children:
 - There is a local delivery pilot for which a funding application is being submitted
 - Would be useful to have support around an evaluation of green space availability and the impact of changes on green spaces
4. Trailblazer work for reducing childhood obesity:
 - This intervention will need to be evaluated, and there is no plan or resources right now for this
5. Housing interventions, such as fuel poverty activities
 - Deprived communities and fuel poverty discussed
 - Need to consider eviction remediation strategies around court evictions, as protections will be lifted soon. Are there Council strategies and how can we evaluate them?
 - There is interest in overcrowding, especially for small children who do not have quality indoor and outdoor space, and how COVID is exacerbating existing issues
 - Physical conditions of housing and interventions need to be examined, such as air quality, damp, fuel poverty
6. Public space availability and anti-social behaviour concerns in TH:

- Where are people going if they are at home, unemployed, if youth services are closed?
- What are the impacts of people using public spaces, around anti-social behaviour? What if the behaviour and noises being reported do not actually constitute anti-social behaviour?
- Co-production/engagement team would be a great resource for understanding lived experience related to this
- Co-production/engagement was discussed including, methods and funding
- What interventions will be important in post-pandemic recovery and what is the strategy for the Places theme over the next few years was discussed
- Bradford pollution and plans now for an airport expansion were considered, plans include student led data collection, noise was discussed and impact of COVID-19 on noise
- Modelling was considered including what are the key outcomes that could be modelled in order to say that system-wide changes have had an impact?
 - ActEarly modelling lead talked about how short-term outcomes from studies will be mapped onto the outcomes that are in an existing model.
 - Co-Production panel being developed, useful to have joint sessions with modellers
- There is a need for better communication in the team to avoid duplication
- The idea of concept mapping was proposed to map how Place and its factors relate to non-communicable disease outcomes. The ActEarly logic model will be circulated and there is the opportunity for each intervention to have its own logic model
- For an outcome-led approach, there is a need to think about what will be evaluated, what the causal mechanisms are and the primary outcomes. There needs to be a focus on prioritizing interventions that are novel (to learn more about them) or those already known to have an appreciable effect.

Heathy Learning

Objectives were to think about coordinating Healthy Learning activities between Bradford and those in London. Areas discussed were:

1. Creating Active Schools framework was presented:

- Now a part of the JU:MP program
- Activity is now being developed to drive system changes in schools in Bradford, within the JU:MP program and within citywide work. A set of self-evaluation tools is now being developed
- There are 3 approaches to organizational change for the framework:
 1. working with a series of partners to develop support toolkit
 2. building collectives of schools for peer support
 3. bespoke one-on-one support for schools from experts
- Intervention approaches for the framework: standardized CPD on creating organizational change, schools will identify individual and collective solutions
 - For in-school monitoring and evaluation - the research team will develop resources
 - Questions were raised re whether the evaluation looks at physical health and how much do schools see in real time?
- The researchers would ideally (with the resources available) like to create a web-based resource with evaluation tools the schools could choose to use, based on outcomes they are interested in. Students could fill in these tools.
- Re how the evaluation tool works: It is an audit tool that relates to the schools' current provision. They look at elements of the framework and give themselves a self-reflection score.
- In the future, criteria can be generated for schools to meet to improve their scores. Right now the score helps them identify where there are gaps and where they can move forward.

2. Other areas of discussion:

- Review of what data is going to be used to measure program outcomes
- Health-related concerns are the priority, especially physical health and sedentary lifestyles.
- Mechanisms for sharing work within schools are needed. It would be helpful to know how partnerships were built and how translational research was implemented - what has worked.

- Financial resources are available to support a person who could coordinate work between Tower Hamlets and Bradford.
 - The Active Partnership Network exists, which may be a useful link.
 - Schools are buying into physically active learning and the integration of movement and learning together, the Bradford team are developing online CPD around this
 - Tower Hamlets schools have previously engaged with research and there is scope for involvement in cognitive development studies and useful to get comparative data with Bradford
 - A question was asked about engagement of non-mainstream education providers and if this is included - they are included as part of the focus on addressing inequalities. Some faith-based private schools have not engaged so far in Tower Hamlets.
 - A question was asked if there is cross-cutting work that addresses all of the ActEarly themes. The ActEarly Holme Wood project was briefly discussed as an example.
 - Highlighted how community researchers would welcome conversations on the analysis stage of ActEarly, to convert analysis into recommendations and actions.
 - It is important to think of schools as a resource that can be mobilized through school networks in terms of engaging people to work creatively with researchers to help deliver interventions
3. Outcomes that resulted from the session:
- People involved in co-production projects that provide insight on turning analysis into recommendations, could be invited for further discussion. A webinar will be set up for colleagues working in Tower Hamlets and Bradford to come together
 - A project co-ordinator will be recruited in Tower Hamlets and a Learning research fellow has been recruited in Bradford

Healthy Livelihoods

The purpose of the session was to gather ideas around evaluation of 2 separate initiatives.

Project 1: Tower Hamlet's Community Food Hub

- A community food hub began at the start of the pandemic to distribute food to families.
- The question now is whether the initiative be continued
- The following dimensions of impact were put to the council: economic development and viability, access to/demand for healthy food, ecological sustainability, and personal/community well-being. Are these the most important impacts and should others be considered?
- Dimensions of impact important to families and household recipients: reduction in hunger, improved quality of life, making ends meet, enhancing income, social contact, community activities, improved health and well-being. Are these the most important impacts and should others be considered?
- Potential methods were suggested and details on project delivery were provided.
- Voluntary organizations have repurposed what they are doing in order to deliver food and have changed their methods of communication with members - important to focus information gathering on this
- There should be a focus on costs, social dimensions of engagement, and income
- Issues raised by workshop attendees included: there is a diverse population with specific dietary needs - it would be important to consider this and issues around cultural acceptance. The element of choice for those receiving the food requires consideration
 - The project team is interested in an assessment of the food quality and hearing how useful the recipients find the food donations. It would be helpful to understand the relationships between organizations and the people they serve. The project is aiming to provide food that is nutritionally rounded and culturally appropriate.
- Issues raised by workshop attendees included: possibility of issues with providing fresh foods, in accessing them, the timeliness for distributing them, and the costs.

- There have been some issues regarding this and fresh food being somewhat limited, but there is a big distribution hub and a lot of restaurants have been donating excess supplies. Now, with extra funding, there is a focus on continuing to provide fresh, nutritional food.
- A question was asked about the ability of the project to meet basic needs - to supply toiletries, sanitary items, etc.:
 - There have been some businesses in the community that provide toiletries for free with a delivery charge. New funding will include toiletries, etc. as part of the standard distribution package
- Issues raised by workshop attendees included: as there is now funding available and not just reliance on donated goods, it would be good to explore what families want and what control they want over the food coming in. There may be issues to think about such as perishable food storage in homes.
 - The project has taken requests from organizations distributing food based on what residents are requesting. It would be useful to talk to residents, but the Council is somewhat removed from them, with organizations operating as an intermediary
- The question was asked if there is a comparable intervention being considered instead of continuing to fund the existing one
 - Not currently, but there may be the chance to compare different types of offer - thinking about acceptability, cultural appropriateness, impact, etc.
- With regards to evaluation, with limited resources there should be a basic survey carried out with those taking part in the project. Are there other things that can be done?
- Are costs being measured?
 - Associations are writing reports but not sure if they are estimating all costs
- Do we have information on individuals who have received the food?
 - This information is accessible
- There is a green recovery bid in development - there is potential for expanding this and for incorporating it into current work

Project 2: Bradford Credit Union Scheme

- Project Overview:
 - Bradford Council, in collaboration with the Credit Union, has piloted a grant scheme to give grant loans to people and is interested in expanding this
 - The project leads would like ActEarly to help evaluate the project
 - Furloughed/unemployed people are given £500, £50 of direct grant and £450 of no interest loan. In 72 hours, £30,000 was distributed during pilot
 - Follow up has indicated that the funding was easy to access and people liked the online banking aspect and were planning to make repayments
 - For evaluation, ActEarly would like to evaluate short and long-term impacts on health and well-being, sense of agency, self-efficacy, and peace of mind
- The question was asked if the program was designed to be first come/first served
 - Eligibility criteria included that recipients must be working age only (below age of 60) but then became first come/first served
- The potential use of trials within cohorts (TWiCS), was discussed. As the financial situation of those in the study would be known, it would be possible to actively select individuals to make an offer.
- Regarding capacity and how the offer was distributed in the last round – would it make more sense to make funds available in a more random way or using the TWiCs approach?
 - It is fair to distribute it randomly, if whether something works is unknown and you have a limited resource. TWiCs is the optimal study design, but it may be hard to convince the Council and credit union to restrict recipients. There is potential to construct a control group as there will be so many people applying and not enough funds to distribute to everyone
- There is national discussion on funding social prescribing related to issues from COVID. It would be helpful to link conversations to see how this work overlaps with the credit union project
- It would be useful to include something around the impact on women, especially mothers. They are unable to provide good food and care and this could affect future generations

- The question was asked about what outcomes to focus on?
 - There is a need to match outcomes to objectives
 - The intention to improve mental health of recipients is in the aims
 - Potential measures include depression/anxiety with short surveys, sense of control, agency, self-efficacy
 - Some of the attractiveness in the initial project may have been the ease with which recipients could get money. This should not be made less attractive by layering on too much evaluation
 - It should be considered whether this amount of money meets immediate needs and equips people to meet future needs
- The question was asked if something could be done across the sites or is this just limited to Bradford? Are there similar schemes in Tower Hamlets?
 - There is an existing crisis support scheme in Tower Hamlets. There may be similarities between this and the credit union scheme
 - There may be less stigma associated with applying for COVID relief -related funds due to how they're pitched, as the others are funding provided for crises
 - Eligibility criteria for the Tower Hamlets program changed due to COVID to be less restrictive, so people can apply more than once
- The question was asked about what number of people might receive these funds in the future
 - This is unknown right now, but it will be on a larger scale than the pilot
- The question was asked: Are there plans for piloting methods with the people who have already received loans?
 - There would need for ethics approval and data sharing to approach those who have already received loans. It would be helpful to build this into the application process going forward

Session 3: Showcase (2 minute snapshots of interesting projects)

Alex Albert: Impact of COVID-19 on families in Tower Hamlets: Asset mapping

- The aim of mapping was to map services and assets available for families and young children in Tower Hamlets and map the changes in support due to COVID-19
- For the project, data from service websites, Facebook, and other social media pages, was reviewed at and triangulated
- There is interest in new services, those that had closed and those that had become remote
- A report is being generated now to highlight findings
- Main findings:
 - Service provision is moving online
 - Websites are not being kept updated
 - A lot of dynamic information is being transferred via WhatsApp

Maria Bryant: Food/Nutrition Projects

- Recently, a group was convened, focussed on obesity and looking at exploring:
 - Evidence base for free school meals
 - Holiday hunger
 - Food availability in secondary schools
 - Role of commercial sector including advertisements
 - Developing community food strategies
- The projects already on board or in progress are:
 1. Consortium: looking at developing implementation tools to support schools to deliver whole school approaches to food
 2. Both sites are thinking more about community food assets - emergency food aid and sustainable approaches

Sally Bridges: NIHR Applied Research Collaboration (ARC) Yorkshire & Humber

- New 3-year funding is available for key national research priorities - to work with patients and service users to develop better outcomes in the areas of:
 - Childrens health & maternity
 - Prevention
 - Inequalities
 - Mental health
 - Multi-morbidity
 - Adult social care
 - Healthy aging

- Partners will be asked to submit proposals –details will be circulated to workshop attendees

Jane West: NIHR PHR funded Local Authority Research System (LARS) project

- 4 month scoping project to explore what a LARS might look like and what would be needed to deliver it
- BMDC staff online survey, focus groups and individual interviews with key council staff undertaken
- A rapid review of potential LARS models has been completed by ScHARR (University of Sheffield)
- A final report will be submitted to NIHR at the end of November
- Potential for larger programme grant to deliver the proposed LARS

Appendix A: Attendance list

Name	Organisation
Alexandra Albert	Research Fellow, Citizen Science, Act Early UKPRP/University College London
Prathi Anand	University of Bradford
Cláudia Andrade	Intelligence and Performance Manager, Tower Hamlets
Somen Banerjee	Director of Public Health, Tower Hamlets
Sally Barber	Principal Research Fellow, Born in Bradford, Bradford Teaching Hospitals NHS FT
Jane Barrett	Head of Research Liaison, Department of Health and Social Care
Laura Bedford	Head of Programmes, Kids in Museums
Damon Boxer	Assistant Director, Department for Education
Collette Brauns	NHS Bradford District and Craven CCG
Sally Bridges	Programme Manager, YHARC, Bradford Teaching Hospitals NHS FT
Maria Bryant	Reader in Public Health Nutrition, University of York
Claire Cameron	University College London
Richard Chew	PR Consultant
Nicola Christie	Professor of Transport Safety, University College London
Richard Cookson	University of York
Andy Cope	Sustrans
Steven Cummins	Professor of Population Health, London School of Hygiene and Tropical Medicine
Andy Daly-Smith	Reader in Healthy Childhood, University of Bradford
Mike Davies	University College London
Carol Dezateux	Professor of Clinical Epidemiology and Health Data Science, QMUL
Ashley Dhanani	Research Associate, UCL
Josie Dickerson	Director, Better Start Bradford Innovation Hub, Bradford Teaching Hospitals NHS FT
Katherine Dunne	Programme Manager, UK Prevention Research Partnership, Medical Research Council
Kersten England	Chief Executive, City of Bradford Metropolitan District Council
Daniel Farag	Nesta
Philip Garnett	Senior Lecturer in Systems and Organisation, University of York
Catherine Godward	Research and Evaluation Manager, The Bromley By Bow Centre
Chris Griffiths	Professor of Primary Care, QMUL
Ali Jan Haider	Director of Strategic Partnerships, NHS Bradford Districts CCG
Muki Haklay	University College London
Bernie Hannigan	Public Health England
Graham Hart	Professor, University College London
Shahid Islam	Senior Research Fellow (Citizen Science and Co-production), ActEarly
Vincent Jaddoe	Erasmus MC
Jens Kandt	University College London

Name	Organisation
Bridget Lockyer	Senior Research Fellow (Qualitative), ActEarly
Dionysia Markesini	JU:MP intern, Born in Bradford, Bradford Teaching Hospitals NHS FT
Keeley McClennan	NHS Liverpool CCG
Max Mclean	Chairperson, Bradford Teaching Hospitals NHS Foundation Trust
Rosie McEachan	Director, Born in Bradford, Bradford Teaching Hospitals NHS FT
Naomi Mead	Research and Evaluation Coordinator, The Bromley By Bow Centre
Mark Nieuwenhuijsen	Barcelona Institute of Global Health
Adriana Ortegon	Research Associate, University College London
Kate Pickett	Professor of Epidemiology, University of York
Nicholas Pleace	Professor, University of York
Madeleine Power	Research Fellow, University of York
David Pye	Local Government Association
Kate Questa	Public Health Registrar, PHE
Aamnah Rahman	Research Fellow, Born in Bradford, Bradford Teaching Hospitals NHS FT
Sian Reece	NIHR Doctoral Research Fellow, Hull York Medical School
Jenni Regan	Director, London Arts and Health
Martyn Regan	University of Manchester
David Rehkopf	Stanford University
Clare Relton	Senior Lecturer in Clinical Trials, QMUL
Louise Rippengill-Clarke	Clinical Director of Strategy and Planning Bradford District & Craven CCG
Katy Scammell	Associate Director of Public Health, Tower Hamlets
Ruth Shaw	Senior Head of Strategy, Change and Delivery, NHS Bradford District and Craven CCG
Trevor Sheldon	Co-Director, ActEarly / Professor of Health Services Research, QMUL
Jessica Sheringham	University College London
Rob Shore	Research Data Analyst, Bradford Teaching Hospitals NHS FT
Paul Simkins	Associate, Arup
Pratima Singh	The Bromley By Bow Centre
Neil Small	Professor of Health Research, University of Bradford
Alex Spragg	Programme Director, Better Start Bradford
Isobel Steward	JU:MP intern, Born in Bradford, Bradford Teaching Hospitals NHS FT
Karien Stronks	Professor of Public Health, Amsterdam UMC
Steph Taylor	Professor in Public Health and Primary Care, QMUL
Steve Thomas	PhD Student, University of York
Will Tuckley	Chief Executive, Tower Hamlets
Marcella Ucci	Senior Lecturer, University College London
Yassaman Vafai	Research Fellow, Healthy Livihoods, ActEarly
Laura Vaughan	Professor, University College London
Jo Ward	North West Social Prescribing Network (NW SP Network)
Amy-Grace Whillans-Welldrake	Tackling Poverty Project Officer, Tower Hamlets
Lydia Whitaker	University College London

Name	Organisation
Toni Williams	Consultant in Public Health Bradford Council
Alexandra Winn	Science Manager – UK Prevention Research Partnership, Medical Research Council
Phil Witcherley	Head of Policy and Performance, City of Bradford Metropolitan District Council
John Wright	Co-Director, ActEarly / Director of Research, Bradford Teaching Hospitals NHS FT
Tiffany Yang	Principal Research Fellow, Born in Bradford, Bradford Teaching Hospitals NHS FT
Emma Young	JU:MP intern, Born in Bradford, Bradford Teaching Hospitals NHS FT
Melany Zarate	Research & Implementation Assistant, Born in Bradford, Bradford Teaching Hospitals NHS FT