

DRAFT REVIEW PROTOCOL

NIHR PHR Review Team

Evidence review of the impact of housing insecurity on the health and wellbeing of children and young people

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Summary

- This work has been commissioned to provide a review and synthesis of research evidence on the impact of housing insecurity on the health and wellbeing of children and young people. It will aim to provide national and local policy makers with the best available evidence to inform future housing policy, housing provision and supportive interventions for families experiencing housing insecurity.
- We will identify, appraise and synthesise the evidence from published research and policy documents in order to produce an evidence review which can add to our understanding of the relationship between housing insecurity and the health and wellbeing of children and young people, and inform future housing policy and practice. The review will also identify if there are significant gaps in the relevant evidence base.
- The first stage will involve developing a conceptual framework based on a review of existing frameworks and stakeholder consultation. The framework will inform the search strategy and the data extraction process, and will be modified and annotated with the results of the evidence synthesis. As well as illustrating where the evidence exists, it will be used to identify and clarify any gaps in the evidence.
- A mixed methods review will be undertaken, incorporating a synthesis of intervention studies, qualitative and quantitative observational studies, including surveys and case studies, indicating potential relationships/pathways between unstable housing situations and the health and wellbeing of children and young people, including reporting where there is evidence of causal mechanisms.
- In consultation with stakeholders, the review and accompanying conceptual framework will form the basis for evidence-based recommendations for policy, service development and future research.
- The final report and all associated outputs will be delivered by the end of September 2022.

Terminology and definitions related to housing insecurity

There is no standard definition or validated instrument to assess “unstable” or “insecure” housing and a wide variety of related terms and definitions are available.

Housing insecurity: The terminology and definitions used by the Children’s Society are based directly on research with children that explores the relationship between housing and wellbeing (Lister et al). They use the term “housing insecurity” and a definition that includes those experiencing and at risk of multiple moves that are i. not through choice and ii. related to poverty. This reflects their observation that multiple moves may be a positive experience if it is through choice and for positive reasons (eg employment opportunities; moves to better housing or areas with better amenities).

Housing instability: Housing instability is variably defined as having difficulty paying rent, spending more than 50% of household income on housing, having frequent moves, living in overcrowded conditions, or doubling up with friends and relatives. [<https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health/interventions-resources/housing-instability>]

Unstable or precarious housing: Public Health England distinguish between “unhealthy”, “unsuitable” and “unstable “ (or “precarious”) housing. The latter is defined as ‘a home that does not provide a sense of safety and security including precarious living circumstances and/or homelessness’ [<https://www.gov.uk/government/publications/improving-health-through-the-home/improving-health-through-the-home>].

Spatial insecurity: Preece and Bimpson (2019) use a broad definition of “housing insecurity” to explore the relationship with mental health. Their definition has three dimensions:

1. Financial insecurity includes issues such as the affordability of housing and its relationship with mental health, relationships with tenure, and the impact of housing-related debts and other financial stressors.
2. Spatial insecurity relates to the (in)ability of an individual or household to remain in a given dwelling or wider neighbourhood area. This includes issues such as eviction and forced moves and their relationship with mental health, tenure security and insecurity, and rurality.
3. Relational insecurity draws out the ways in which individuals’ experiences of housing and home are bound up with relationships with others.

There are also specific and quantitative definitions used in research literature:

Residential mobility: This term may be defined in terms of frequency and/or number or distance of moves (Jelleyman et al 2008).

Residential transience: This term generally denotes a high frequency of moves and more specifically may be defined by a specific minimum number of moves before a specific age. For example “a regional sample of over 1000 children participating in the National Collaborative Perinatal Project found that moving three or more times before age 7 was associated with 36% greater likelihood of lifetime major depression and more than twice the likelihood of developing depression before age 14 compared with those who moved less” (Glasheen et al 2019).

Homelessness/temporary housing: Regardless of housing tenure and the condition and suitability of housing for families, unstable or insecure housing circumstances are the most likely direct precursor to homelessness. This implies that evidence for the direct health effects of homelessness and/or living in temporary council provided accommodation is directly relevant to understanding the impacts of unstable housing.

Policy background

Recent policy and research reports widely highlight concern about the wellbeing of families with children related to housing insecurity. This has grown as the result of a number of trends in the cost and availability of housing, reflecting in particular the rapid increase in the number of low income families with children in the private rental sector. This is due in part to a combination of a lack of social housing and unaffordability of home ownership. The nature of tenure in the private rented sector and gap between available benefits and housing costs means even low income families that do not experience frequent moves may experience the impact of perceived housing insecurity. The increase in homeless families, including “hidden homeless” living with relatives or friends and those in temporary accommodation provided by local authorities, are a related consequence of the lack of suitable or affordable rental properties which is particularly acute for lone parents and larger families. There is also evidence on the scale and severity of the issue from the numbers of children entering the care system or being referred to social services because of family homelessness (<https://www.insidehousing.co.uk/news/news/one-in-three-councils-took-children-into-care-due-to-homelessness-48690>)

There is also a relationship between housing tenure, unstable housing situations and the quality or suitability of homes. For example, if families are concerned that if they lost their home they would not be able to afford alternative accommodation, they may be more likely to stay in overcrowded or poor quality accommodation or in a neighbourhood where they are further from work, school or family support. This may be an additional causal pathway whereby housing insecurity can lead to diverse housing and neighbourhood related negative impacts for children, even if it is not reflected directly in experience of frequent moves or homelessness.

Research evidence on relationships between housing in childhood and health

There is a substantive evidence base of longitudinal cohort studies and intervention studies to support a causal relationship between the quality, affordability and stability of housing and child health. This includes immediate impacts on mental and physical health outcomes and longer term life course effects on wider determinants of health including education, employment and income as well as health outcomes (Li et al, 2021).

Frequent moves are also associated with poorer access to preventive health services, reflected in lower vaccination rates. (Pearce et al, 2008; Brown et al, 2012)

The relationship between housing insecurity and child health is likely to be complicated by the frequent coexistence of poor housing conditions or unsuitable housing with housing insecurity. The relationship between unstable housing situations and health outcomes will be further confounded by other major stressors such as poverty and changes in employment and family structure that may lead to frequent moves. The evidence from cohort studies that show a relationship between housing insecurity, homelessness or frequent moves in childhood and health related outcomes can usefully quantify the proportion of children and families at risk of poorer health associated with housing instability. It can, however, only suggest the possibility of plausible causal associations. Additional (and arguably stronger) evidence comes from the case studies and qualitative interviews with children and young people that explore the direct and indirect impacts of housing insecurity on their everyday lives and their physical and mental wellbeing.

Aim and objectives

The overall aim of this review is to identify, appraise and synthesise research evidence that explores the relationship between housing insecurity and the health and wellbeing of children and young people. We will aim to gain an evidence-informed understanding of the relevant factors and causal mechanisms in order to make evidence based recommendations for policy, practice and future research priorities.

Specific objectives will be:

- To produce a conceptual framework for exploring the relationship between insecure (or “unstable”) housing and the health and wellbeing of children and young people
- To conduct a systematic review to identify, appraise and synthesise to most relevant research evidence on the relationship between housing insecurity and the health and wellbeing of children and young people.
- To identify evidence based recommendations for housing policy and practice, and future research to address identified research gaps.

Project plan

We are proposing to undertake the review in two stages.

- 1) We will use relevant published frameworks and models of the relationship between housing and health to inform development of an evidence based logic model of how housing insecurity and related contextual factors impact on the health and wellbeing of children and young people. The framework will be used in the following ways during the review process:

- A tool to guide and inform consultations with stakeholders, including children and young people
- A framework to inform the development of data extraction and evidence synthesis
- An outline onto which to map evidence from the evidence synthesis
- A visual representation of the review findings to indicate both where evidence exists, the strength of that evidence and where evidence gaps exist.

We anticipate the conceptual framework will be developed and refined during the review process.

- 2) During the second stage, we will undertake a systematic review, potentially drawing upon both quantitative and qualitative studies and included research and policy reports as well as journal publications. We will initially focus on qualitative studies as these are most likely to provide evidence on the ways in which housing insecurity can impact on health and wellbeing. We will also focus on UK specific evidence as the most relevant given the differences in housing policy between the UK and other European and high income countries. Additional research from other developed countries may be considered for inclusion depending on relevance to UK, and the overall quantity and quality of UK evidence identified.

Proposed methodological approach

Given the complex nature of the topic, the review will take an iterative approach to evidence identification and synthesis and use an advisory group of key topic experts and stakeholders to ensure that relevant evidence is identified and appropriately interpreted.

Literature search and screening

There will be two complementary search strategies to identify relevant evidence for the review. The first will be a database search and will search multiple electronic databases for peer-reviewed journal articles. The search will comprise subject headings and free-text terms and will be developed on MEDLINE then adapted for the other databases.

We will search the following databases:

- MEDLINE
- EMBASE
- PsycINFO
- Web of Science Social Science Citation Index)
- Applied Social Sciences Index and Abstracts (ASSIA)

- International Bibliography of Social Sciences (IBSS)

More focused additional searches may also use the Web of Science Science Citation Index to other sources within the ProQuest Social Sciences Collection (e.g. Social Services Abstracts). The initial search will be restricted to papers in English and UK studies will be flagged.

The second search strategy will identify additional evidence using the following search methods:

- Scrutiny of reference lists
- Search of housing charity and other relevant websites
- Scrutiny of recent policy documents for relevant, peer reviewed evidence.
- Citation searching of key evidence sources
- Web search for any relevant UK grey literature on websites of organisations working in the field of housing or support for low income families and children (see Appendix 2 for list of organisations)

Search results will be downloaded to a reference management system (EndNote) and screened against the inclusion criteria by one reviewer, with a 10% sample screened by a second reviewer. Uncertainties will be resolved by discussion among the review team, as recommended by Cochrane Rapid Review Guidelines. (Garritty et al, 2021)

[Review scope and inclusion criteria – See Appendix 1 for draft conceptual framework](#)

Review question: What are the impacts of housing insecurity on the health and wellbeing of children and young people?

Population: At-risk families with children aged 0 to 16 (ie pre-school or school age).

Rationale: Housing insecurity is a problem with implications for health for both families with children and for young people who have left a family home or local authority care. As the context of housing insecurity is likely to be different for these groups and they represent relatively distinct at risk population groups, we propose to focus initially on at-risk families with pre-school or school age children (ie 0-16 years). Risk groups include those on low incomes, lone parents and ethnic minority groups including migrants refugees and people seeking asylum. Lone parents and large families on low incomes may be at higher risk because they are least likely to be able to access to suitable/affordable housing.

Exposure: Actual or perceived insecurity related to housing situations including: private rental accommodation with short term or insecure tenancy agreements, temporary or emergency housing, homelessness

Rationale: “Unstable housing” as noted above is a term used to describe very diverse housing situations; the term “precarious housing” is also used in a PHE report to refer to “a home that does not provide a sense of safety and security” and housing situations may also be described as “insecure” where tenure is threatened by affordability or risk of homelessness caused by tenancy termination. Consultation suggests that the stresses related to adverse mental health outcomes are closely related to **housing insecurity** even for those that do not have frequent moves. The harm to children’s wellbeing therefore relates to both the impacts of actual frequent moves but also the stress of not knowing if a home is permanent or temporary. We therefore propose to initially define the exposure of interest as actual or perceived insecurity related to housing situations which may include: private rental accommodation with short term or insecure tenancy agreements, temporary or emergency housing, homelessness (including “hidden” homelessness). We will also include research related to interventions that have the specific aim of reducing housing insecurity and/or mitigating the impact of housing insecurity on the health and wellbeing of children.

Comparators: Alternative housing policies, programmes or circumstances as reported

Rationale: It is anticipated that there will be limited evidence from controlled trials of interventions and that comparisons may therefore involve “natural experiments” where the impact of changes in policy, or variation between areas in terms of housing policy, or access to support for families at risk for example, can be inferred.

Outcomes: All reported immediate and short-term outcomes related to childhood mental and physical health and wellbeing

Rationale: There is evidence for a relationship between tenure, frequency of moves and longer term outcomes including employment and educational outcomes as well as a direct association between tenure and wellbeing (Angel & Gregory 2021). The body of research on the relationship between quality of housing and physical health is summarised by Shelter’s report “Chance of a Lifetime). (https://assets.ctfassets.net/6sxvmndnnpn0s/4LTXp3mya7ligRmNG8x9KK/6922b5a4c6ea756ea94da71ebdc001a5/Chance_of_a_Lifetime.pdf)

For this review we will exclude long term outcomes related to housing mobility or insecurity in previous decades. We will focus on the immediate and short term impact of housing insecurity for children and families which is the current major priority for families and for our policy and practice stakeholders. The longer term impacts of current housing insecurity will not be fully known for several decades, when today’s 0-16 year olds are middle aged and older.

Study Types: We will include all study types that provide evidence on the relationship between housing insecurity and the health and wellbeing of children up to the age of 16. This is likely to include qualitative case studies, cohort studies and surveys, and intervention studies of programmes that specifically aim to reduce housing insecurity, or mitigate the impact of housing insecurity for families with children.

Data extraction and quality appraisal

We will extract and tabulate key data from the included papers. Data extraction will be performed by one reviewer, with a 10% sample checked for accuracy and consistency. (Garritty et al. 2021) For qualitative papers we will extract data from both the authors' findings and from verbatim extracts within the published paper. The data extraction forms for each type of study design (qualitative, observational and survey) will be designed using the framework of themes arising from the conceptual model. Quality (risk of bias) assessment will be undertaken using appropriate tools for the types of study designs included. Quality assessment will be performed by one reviewer, with a 10% sample checked for accuracy and consistency (as recommended by Cochrane Rapid Review Guidance).

Methods of synthesis

We will provide an evidence synthesis structured according to our revised conceptual framework. Additional forms of qualitative analysis and synthesis will depend on the characteristics of the evidence identified. We will seek to characterise key features of the literature including strengths, limitations and gaps. Assessment of the overall quality and relevance of evidence will form part of the narrative synthesis. We will describe the volume, quality and degree of consistency in the evidence, and where there are gaps requiring future primary research.

Outputs and disseminations

We will make the protocol available via the PHR programme website, our own website and PROSPERO.

The framework and associated evidence synthesis will be shared with national policy makers, local government representatives (officers and councillors), and housing providers (and their representative organisations)

Proposed outputs:

- Report for the NIHR PHR programme
- Peer-reviewed journal article for housing policy/public health journal
- Evidence briefing for decision-makers

- Summary materials for public audiences

There is also an opportunity to co-produce an Evidence Briefing for a series produced by the CaCHE Knowledge Hub which would facilitate reaching a wide audience in the housing field through their networks.

Stakeholder involvement

During December 2021 key policy and practice stakeholders and topic experts were invited to comment on the potential focus of the review and the appropriate definitions and scope in terms of review questions and inclusion criteria. Further consultations during the review process will be undertaken to gain feedback and advice on the identification of relevant evidence sources, and on the interpretation and implications of the evidence synthesis. A list of those already consulted, or to potentially be invited to contribute in an advisory capacity, is provided in Appendix 2.

We will also consult children and young people through engagement with youth organisations in deprived urban and rural areas of the UK. We have existing research collaborations with relevant organisations in South Yorkshire, London and the North East that we can approach as required. This will ensure that the review is informed by their understanding and insights on the ways in which their housing situation impacts on health and wellbeing, and contribute to understanding and interpretation of the evidence which we find. We will also invite them to contribute to the development of outputs for a public audience.

Timetable and milestones

Appendix 3 provides a Gantt chart for the review stages and milestones

Key references and relevant research and policy reports

- Angel, S. & Gregory, J. (2021) Does housing tenure matter? Owner-occupation and wellbeing in Britain and Austria, *Housing Studies*, DOI: 10.1080/02673037.2021.1912714
- Barnes, M., Cullinane, C., Scott, S. and Silvester, S., *People living in bad housing: Numbers and health impacts*. Shelter, 2013.
- Brown, D., Benzeval, M., Gayle, V., Macintyre, S., O'Reilly, D., & Leyland, A. H. (2012). Childhood residential mobility and health in late adolescence and adulthood: findings from the west of Scotland twenty-07 study. *Journal of Epidemiology and Community Health*, 66(10), 942–950.
- Brown, P., Newton, D., Armitage, R. and Monchuk, L. *Lockdown. Rundown. Breakdown: The COVID-19 lockdown and the impact of poor-quality housing on occupants in the North of England*. The Northern Housing Consortium, 2020
- Clair A. *Housing: An under-explored influence on children's well-being and becoming*. *Child Indicators Research*. 2019 Apr;12(2):609-26.
- Cutts DB, Et al (2011), 'US housing insecurity and the health of very young children', *American Journal of Public Health*, Issue 101 August 2011
- Dong M, et al (2005), 'Childhood residential mobility and multiple health risks during adolescence and adulthood: the hidden role of adverse childhood experiences', *Paediatric and Adolescent Medicine*, Issue 159
- Garritty C., Gartlehner, G., Nussbaumer-Streit, B., King, V. J., Hamel, C., Kamel, Cet al (2021). *Cochrane Rapid Reviews Methods Group offers evidence-informed guidance to conduct rapid reviews*. *Journal of clinical epidemiology*, 130, 13-22.
- Glasheen C, Forman-Hoffman V, Hedden S, Ridenour T, Wang J, Porter J. Residential transience among US adolescents: association with depression and mental health treatment. *Epi Psych Sci*. 2019 Dec;28(6):682-91.
- Jelleyman, T. & Spencer, N. (2008) Residential mobility in childhood and health outcomes: a systematic review. *Journal of Epidemiology and Community Health*., 62, 7.
- Li, Yuxi, Rebecca Bentley, Ankur Singh, and Ludmila Fleitas Alfonzo. *Housing disadvantage in childhood and health: a systematic review.*" (2021): JECH A7-A7. (Abstract from SSM ASM September 2021)
- Lister, R (2020) *Moving Always Moving: The normalisation of housing insecurity among children in low-income households in England*. The Children's Society, University of Bath.]
- Oishi S, Schimmack U. Residential mobility, well-being, and mortality. *Journal of personality and social psychology*. 2010 Jun;98(6):980.
- Oishi S, Talhelm T. Residential mobility: What psychological research reveals. *Current Directions in Psychological Science*. 2012 Dec;21(6):425-30.
- Pearce, A., Elliman, D., Bedford, H., Law, C., & Millennium Cohort Study Child Health Group. (2008); *Residential mobility and uptake of childhood immunisations: findings from the UK Millennium Cohort Study*'. *Vaccine*, 26(13), 1675–1680

Preece J, Bimpson E. Housing and Insecurity and Mental Health in Wales. CaCHE, University of Glasgow: Glasgow, UK. 2019

Preston L, Cantrell A, Paisley S, Peasgood T, Brazier J. A rapid scoping review of reviews on the evidence on housing and its relationship to wellbeing. What Works for Wellbeing, 2016.

Other relevant CaCHE evidence reviews, primary research and policy reports:

Lister, R (2020) Moving Always Moving: The normalisation of housing insecurity among children in low-income households in England. The Children's Society, University of Bath. Online at: <https://www.childrenssociety.org.uk/sites/default/files/2020-10/Moving-Always-Moving-Report.pdf>

Rugg, J and Wallace, A (2021) Property supply to the lower end of the English private rented sector. Centre for Housing Policy, University of York. Nationwide Foundation. Online at: <https://www.york.ac.uk/media/chp/documents/Sustainable-Private-Rented-Sector.pdf>

Children's Commissioner (2019) Bleak Houses: Tackling the crisis of family homelessness in England. Online at: <https://www.childrenscommissioner.gov.uk/wp-content/uploads/2019/08/cco-bleak-houses-report-august-2019.pdf>

Children's Commissioner (2020) No way out: Children stuck in B&Bs during lockdown. Online at: <https://www.childrenscommissioner.gov.uk/wp-content/uploads/2020/08/cco-no-way-out.pdf>

Rogaly, K., Elliot, J and Baxter, D (2021) What's causing structural racism in housing? Joseph Rowntree Foundation. Online at: <https://www.jrf.org.uk/report/whats-causing-structural-racism-housing>

Hill, K and Webber, R (2021) Seeking security in an unstable world: low-income families before and during the pandemic. Centre for Research in Social Policy at Loughborough University and Joseph Rowntree Foundation. Online at: <https://www.jrf.org.uk/report/seeking-anchor-unstable-world-experiences-low-income-families-over-time>

Croucher, K., Quilgars, D. and Dyke, A (2018) Housing and life experiences: making a home on a low income. University of York and Joseph Rowntree Foundation. Online at: <https://www.jrf.org.uk/report/housing-and-life-experiences-making-home-low-income>

National Children's Board (2016) Housing and the Health of Young Children: Policy and evidence briefing for the VCSE sector. Online at: <https://www.ncb.org.uk/sites/default/files/uploads/files/Housing%2520and%2520the%2520Health%2520of%2520Young%2520Children.pdf>

O' Shea, N and McHayle, Z (2021) Time for Action: Investing in comprehensive mental health support for children and young people. Children and Young People's Mental Health Coalition and Centre for Mental Health. Online at: https://cypmhc.org.uk/wp-content/uploads/2021/12/CentreforMH_TimeForAction.pdf

Health Equity in England: The Marmot Review 10 Years On. February 2020. Online at: <https://www.health.org.uk/publications/reports/the-marmot-review-10-years-on>

Health Foundation - Evidence Hub report "Housing Stability & Security"

<https://www.health.org.uk/evidence-hub/housing/housing-stability-security>

Joseph Rowntree Foundation (JRF) "Renters on low incomes face a

policy black hole: homes for social rent are the answer” Elliott J, Earwaker R. 2021

<https://www.jrf.org.uk/report/renters-low-incomes-face-policy-black-hole-homes-social-rent-are-answer>

CaCHE web reports:

[Housing insecurity and mental health in Wales: an evidence review](#)

[Policy briefing: housing insecurity and mental health](#)

[Forgotten mothers: the case for a policy focus on the experiences of motherhood and homelessness](#)


[Health and wellbeing in the private rented sector Part 1: Literature review and policy analysis](#)

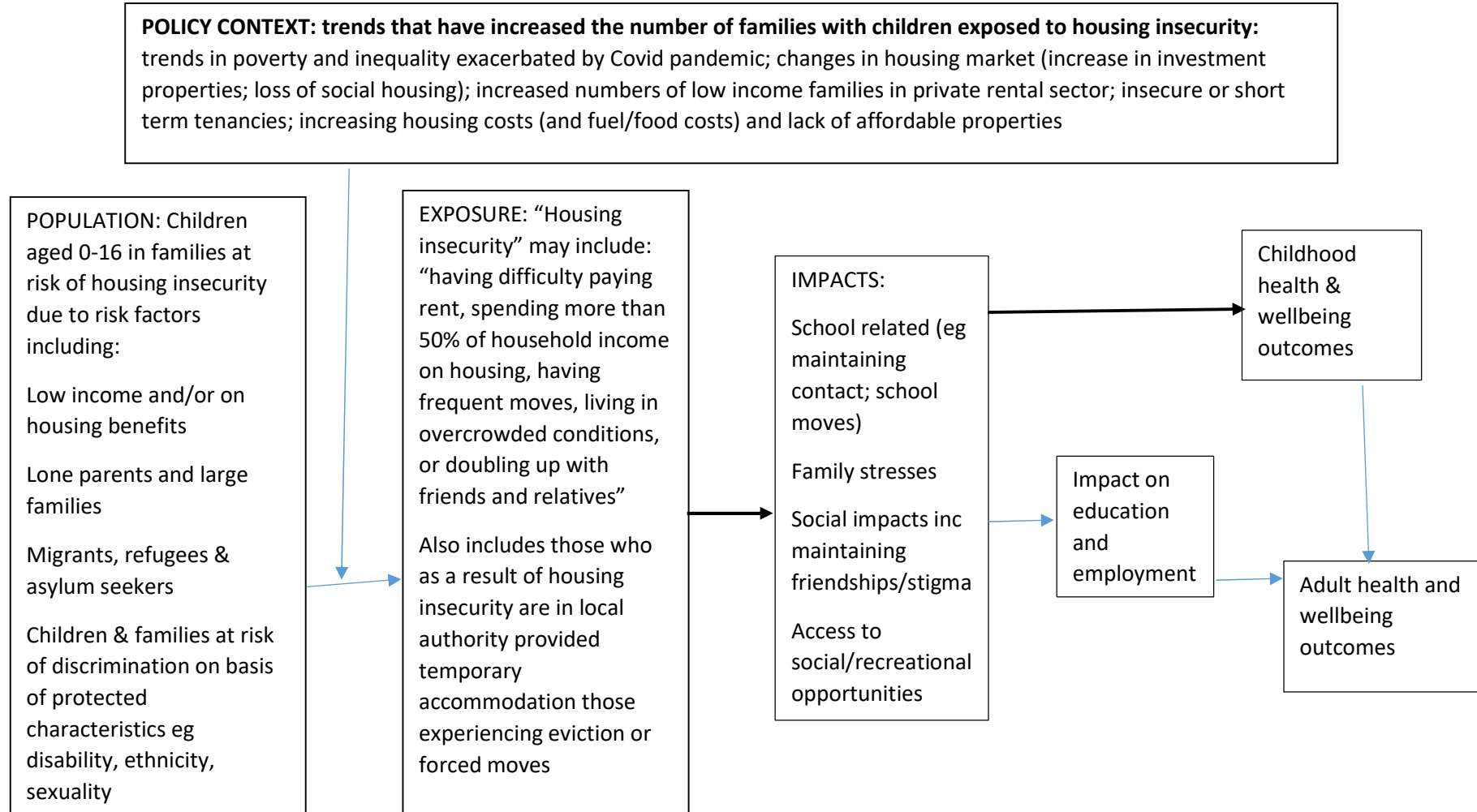
[Health and wellbeing in the UK private rented sector Part 2: Findings from tenant interviews](#)

Current research projects:

1. Shelter, JRF and Trust for London (2022) **Living in Limbo** project. A survey of residents in temporary accommodation.
2. **CHAMPIONS** research project on the experiences of families with children under 5 who have been living in temporary accommodation. (Ongoing Covid-related project interviewing families with young children in temporary accommodation.”Led by Professor Monica Lakhanpaul (UCL) and run by University College London and De Montfort University Leicester.)

Appendix 1: Draft conceptual framework

A priori conceptual framework for relationship between housing insecurity and the health and wellbeing of children and young people (based on stakeholder consultation and review of policy documents) Focus of this review represented by thicker arrows ()



Appendix 2: Stakeholders

Project advisors:

Gareth Young, CaCHE Knowledge Hub, University of Sheffield

Amy Clair, Fellow in the Australian Centre for Housing Research, University of Adelaide

Rachel Casey, Housing Policy and Partnerships Officer. Joseph Rowntree Foundation Rachel.Casey@jrf.org.uk,

Hannah Aldridge, Senior Policy and Research Officer, Child Poverty Action Group (CPAG) haldridge@cpag.org.uk,

Claire Gilbert, Public Health Registrar, Wakefield Council and West Yorkshire Housing & Health Partnership (Healthier Homes for Healthier Children)

Toni Williams, Consultant in Public Health (Health & Wellbeing), Office for Health Improvement and Disparities, Department of Health and Social Care

Karen Horrocks. HWB Programme Manager (Healthy Places and Sustainable Communities), Office for Health Improvement and Disparities, Department of Health and Social Care

Sarah Roxby, Associate Director – Health, Housing and Transformation, Wakefield District Housing

Other potential topic expert advisors

Dr Jenny Preece (research on on housing exclusion and access to housing, mental health and housing)

Dr Jennifer Harris (CaCHE research on health and wellbeing in the private rental sector)

Prof. Craig Gurney (teaching & research interests include the meaning of home, social harm & housing & the social construction of housing tenure, work on housing and mental health)

Dr. Kesia Reeve (work on women and homelessness, marginalised groups)

Dr Harriet Churchill (a focus on childhood and family relations, childhood equality, welfare reform)

Julie Rugg, University of York, Centre for Housing Policy (private rental sector)

Gemma Hyde, Town and County Planning Association (Gemma.Hyde@tcpa.org.uk: Starting well, planning and the impact of housing on children and young people in the first 1001 days.)

Potential stakeholder organisations (website searches and wider consultation/dissemination)

- Children's Commissioner for England
- The Children's Society
- National Children's Bureau
- Children and Young People's Mental Health Coalition
- Child Poverty Action Group (CPAG)
- The Young People's Health Partnership
- Shelter
- Homeless Link
- The Queen's Nursing Institute
- Health and Wellbeing Alliance
- British Medical Association
- The Health Foundation
- Project 17
- Maternity Action Migrant Women's Rights Service
- Race Equality Foundation
- Runnymede Trust
- Trust for London
- Toynbee Hall
- Renters' Reform Coalition
- Centrepoint
- The Young Women's Trust

Appendix 3: Review Project Gantt chart.

This sets out our proposed timeline for completion of the review. We will hold regular team meetings to monitor progress and will keep the PHR programme team informed of progress at regular intervals.

Main review stages	Feb 22	March 22	April 22	May 22	June 22	July 22	Aug 22	Sept 22
Scoping and protocol development	x							
Scoping and development of conceptual framework	x	x						
Evidence identification			x	x				
Data extraction/quality assessment				x	x	X		
Analysis and report writing					x	x	x	
Delivery of draft report							x	
Completion final report								x
Co-production and PPI activities								
Consultation with young people and families		x			x		x	
Consultation with topic experts and stakeholders		x			x		x	
Production of guidance for research commissioners and policy makers							x	x