



Health Pioneers Charity

Impact Report 2022



Contents

Contents	2
Introduction	3
Our Mission	3
Our Story	3
Our Programs	4
Pathways to Health	6
The Project	6
The Events	6
Impact Report	6
Benefits of the Program	7
Impact of Pathways to Health	7
Participant Feedback	9
Mentorship to Health	10
Impact of Mentorship to Health	11
Academic Year 2020 - 2021	11
Student Demographics	11
End of Scheme Evaluation	12
Academic Year 2021 - 2022	13
Student Demographics	13
End of scheme evaluation	15
Participant Feedback	15
Research team	16
Financial Review	16
Volunteers	17
Structure, Governance & Management	17
Administrative Information	18
Contact Information	18



Introduction

Our Mission

We empower young people through health and leadership education to shape their communities.

Health. Empowerment. Community.

Our Story

Led by over 150 healthcare professionals, Health Pioneers was founded in 2020 to tackle health and education inequalities. Working in education and healthcare sectors, our founders recognized the challenges faced by young people today, particularly those from lower socioeconomic backgrounds who experience a greater proportion of deprivation, poorer educational attainment, and lifelong health outcomes.

As a charity, we believe that young people are the source of innovative and creative solutions to these challenges. At our core is the drive to empower young people through health and leadership education to shape their communities and ultimately reduce these societal inequalities.

We believe that through empowering young people they become the future Health Pioneers of society.



Our Programs

Our programs are based on the belief that young people are the source of innovative and creative solutions. We empower young people through health and leadership education to use these solutions to shape their communities and ultimately reduce these inequalities.

Reasons why we should empower young people:

1. Social inequalities are associated with most of the leading causes of death in young people.
2. Poverty is associated with adverse neuro-developmental, health, educational and long-term social outcomes.
3. 23% of young people in England report they live with a long-term condition/disability, 30% of who found this affected their school attendance and/or participation.
4. Childhood obesity is one of the biggest current public health issues. The prevalence of severe obesity within the least deprived groups of the UK is increasing.
5. Being not in employment, education or training (NEET) negatively impacts health, whilst the chances of being NEET increase relative to socioeconomic disadvantage and deprivation.

How being healthy improves education outcomes:

1. Lack of healthy food, such as fresh fruits and vegetables containing essential nutrients such as minerals and vitamins, is associated with lower grade attainment in students



2. Higher physical fitness is associated with improved cognitive performance, higher grade attainment, improved class attendance and behaviour among students.
3. Missing breakfast is associated with decreased cognitive performance. While experiencing hunger is associated with lower grades, absenteeism, repeating academic year(s) and reduced concentration.

Pathways to Health

Pathways to Health is a health education and leadership program that empowers young people to work with health professionals to design, implement, and lead a health project that solves a health problem.

Mentorship to Health

Mentorship to Health tackles the socio-economic inequality that exists within the healthcare system and applying to university. The program supports primarily state school students aged 16 and above who wish to pursue healthcare related careers.



Pathways to Health

Pathways to Health runs all year around and students can join at any point. There are two aspects to the program: The Project and The Events.

The Project

Students design and create a project to tackle a health issue they are passionate about. They will be allocated a healthcare professional mentor to support them throughout. The overall aim is to create a repository of health information designed by young people for young people.

The Events

Throughout the year there will be a combination of virtual and in-person events on health topics delivered by healthcare professionals. Students can attend as many as they would like and if they choose to can even present alongside a healthcare professional!

Impact Report

Upon completion of the students project, they will submit an impact report. Students graduate from the scheme with their Health Pioneers Award recognizing community-based improvement projects, leadership skills development and competency in health education modules. As well as certificates of attendance for any of the events they have attended.



Benefits of the Program

- Opportunity to develop knowledge of health-related issues in areas such as chronic health issues, public health and mental health.
- Obtain a range of leadership skills
- Build a network with a community of ambitious peers and local health professionals
- Lead and implement a health project that improves the health of young people
- Receive the Health Pioneers Award and the British Science Association CREST Award
- Receive Certificates of Attendance for events

Participation in Pathways to Health

The 2021 cohort was our first cohort and as of writing is yet to complete the programme (for this cohort the programme lasted a year. This has changed for the 2022 cohort whereby students can join throughout the year). In that time we have successfully hosted our Health & Leadership Education Weekend. Students are currently finalising their projects.

Student demographics

96 students enrolled in total, 97% stated they wished to enter higher education. All students consented to the collection of demographic and socioeconomic data regarding their individual and household background. A summary of the data is provided below (Table 1).

Gender	70% female, 28% male, 2% prefer not to say
Religious belief	59% Muslim, 18% Christian



Ethnicity	29% Bangladeshi, 17% Black African, 5% White British
Eligible for Free School Meals	42%
Household income <£35,000/year	56%
Role as a Young Carer	1%
First in their family to go to University	46%
Estranged from their family	2%
Identifying as having a disability	1% (2% prefer not to say)
Part of the Travelling Community	0%
Pupil Premium	14% (43% were not sure if they were eligible)
Had been in care	1%
Refugees	0%

Table 1: Demographic and socioeconomic data for students (n = 96) engaged with the Pathways To Health scheme in the academic year 2021 - 2022.

Health & Leadership Weekend Conference 2021

Two 2-day conference events were held at Queen Mary University London and at East London NHS Foundation Trust Headquarters, in October and November 2021, respectively. These events included a variety of workshops, lectures and small-group breakout sessions.

The health topics covered included:

- Health Inequalities



- Mental Well-being
- Healthy Eating
- Physical Activity
- Relationships and Sexual health
- Basic First Aid

Leadership skills workshops covered:

- Public Speaking
- Project Management
- Leadership skills
- Negotiation skills

Student Feedback

Prior to the conference, we asked students enrolled to take part to complete a short survey to self-rate their confidence in their understanding of various health topics and areas of leadership skills. The ratings were always a confidence rating out of 5. There were 96 students that completed the pre-conference survey (Table 2).

Of the 96 students completing the pre-conference survey:

- 56% of students had a household income of <£35,000/year
- 46% would be the first in their family to attend university
- 42% were eligible for free school meals
- 14% were eligible for Pupil Premium

Prior to the conference, the areas that students felt most confident were in their understanding of mental health and well-being (average score of 4.1 out of 5), healthy eating and physical activity (average score of 4.1 out of 5), and leadership skills (average score of 3.9 out of 5). The area that students felt least confident in was in networking and CV development (average score of 2.8 out of 5).

After the conference, we asked participants to complete a further survey to reflect on their self-rated confidence in their understanding of the same topics and skills. There



were 81 student responses to the post-conference survey (Table 2). The feedback shows that all students gained knowledge in the health topics and leadership skills domains, with the greatest improvements in confidence occurring in the areas of health inequalities, basic first aid and negotiation skills. The area that students felt least confident in, after the conference, remained in the area of networking and CV development (average score of 3.4 out of 5), a gain of only 0.6 points in confidence from before the conference.

	Average self-rated confidence score (out of 5) before conference	Average self-rated confidence score (out of 5) after conference	Improvement in confidence
How confident are you in your understanding of health inequalities	3.2	4.5	+1.3
How confident are you in your understanding of basic first aid	2.9	4.5	+1.6
How confident are you in your understanding of relationships and sexual health	3.8	4.7	+0.9
How confident are you in your understanding of mental health and well-being	4.1	4.7	+0.6
How confident are you in your understanding of healthy eating and physical activity	4.1	4.3	+0.2
How confident are you in	3.3	4.5	+1.2



your understanding of project management			
How confident are you in your understanding of good negotiation skills	3.3	4.4	+1.1
How confident are you in your understanding of leadership	3.9	4.6	+0.7
How confident are you in your understanding of networking and CV development	2.8	3.4	+0.6

Table 2: Participant self-rating scales before and after the Pathways To Health Conference on a variety of health and leadership skills topics. Before survey (n = 96), after survey (n = 81).

Participant Feedback

"I was able to note down the interesting facts and terms I learned so that I can be more prepared to complete my project."

"Public Speakers made me more aware about the techniques I can use to present myself as more confident than I maybe actually am."

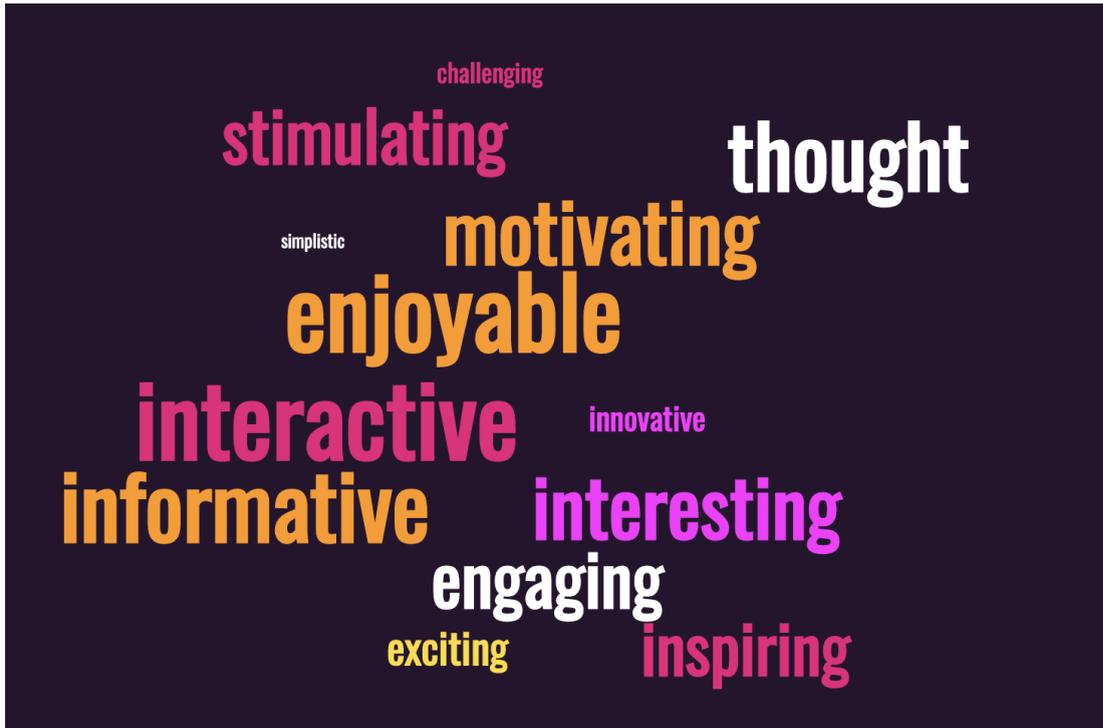
"I enjoyed the concise group activities as well as the info given as it was very informative and insightful."

"I loved the Street Doctors session because I learnt a lot and I can use this knowledge in emergencies now."

"I enjoyed this lesson due to how interactive it was from the start and how we were able to tell them questions and improve our own understanding of first aid as a health pioneer."



Word cloud: Pathways to Health Conference 2021





Mentorship to Health

Mentorship to Health is a programme created by Health Pioneers to tackle the socioeconomic inequality that exists within the healthcare system and applying to university. Our programme supports primarily state school students aged 16 and above who wish to pursue healthcare related careers.

Features of the scheme:

1. One-to-One mentorship programme

Our mentorship programme matches students with senior university students or healthcare professionals to facilitate their application to study for a career in healthcare.

2. Talks & Workshops

We host talks from professionals and current students to give students an insight into careers in healthcare and life at university. While hosting workshops that cover topics including personal statement writing, choosing the right course and university for you, preparing for entry exams, and perfecting interview technique.

3. Resources & Materials

Access to bespoke resources curated by our team to help students apply and prepare for university.

4. Interview Preparation



The program hosts interview workshops and one-on-one preparation to facilitate students' preparation for different types of interviews encountered at UK medical schools.

Impact of Mentorship to Health

Our first cohort joined during the COVID pandemic of 2020, applying to university in Autumn of 2020. For the information below, we refer to the academic year 2020 - 2021 as being the cohort of students who joined the scheme in the summer of 2020, applied to university in October 2020 and received their offers from universities by Spring/Summer term of 2021. We use this same timeline format for every subsequent academic year. Our current cohort, academic year 2022 - 2023 represents our third intake of students.

Academic Year 2020 - 2021

During the academic year 2020 - 2021, a total of 136 students and 58 mentors participated in the Mentorship to Health scheme. All students consented to the collection of demographic and socioeconomic data regarding their individual and household background. A summary of the data is provided below (Table 3). Data was also collected regarding students' perceived barriers to successful admission and participation at a UK university medical school (Table 4).

Student Demographics

Gender	71% female
Religious belief	55% Muslim, 33% Christian
Ethnicity	34% Bangladeshi, 21% Black African
Eligible for Free School Meals	46%



Household income <£35,000/year	58%
Role as a Young Carer	12%
First in their family to go to University	52%
Estranged from their family	1%
Identifying as having a disability	0%
Part of the Travelling Community	0%
Pupil Premium	16%
Had been in care	0%

Table 3: Demographic and socioeconomic data for students (n = 136) engaged with the Mentorship To Health scheme in the academic year 2020 - 2021.

Unsure if they would obtain required academic grades	48.5%
Financial constraints	45.5%
Worries about not fitting in at university	42.4%

Table 4: Summary of the most common perceived barriers to successful admission to a UK University Medical School, academic year 2020 - 2021.

End of Scheme Evaluation

Of the 136 students that enrolled, only 25 students (20%) responded to our end of programme feedback form.

The top three university choices were:

1. King's College London (48.5%)
2. University of Nottingham (39.4%)
3. University College London (36.4%)



The most frequent universities inviting students for interview were:

1. King's College London (28%)
2. University of Nottingham, University College London, Barts and the London Medical School (16%)
3. University of Exeter (12%)
4. University of Oxford (12%)

The most frequent universities issuing a conditional offer after interview:

1. Barts, Nottingham, King's College London (16%)
2. University of Oxford (12%)
3. University of Exeter, University College London, St George's University and Kent & Medway Medical School (8%)
4. Received no offer (24%)

Our programme was a success and proved popular with the students:

- 94% of students were "Very likely" to recommend the Mentorship to Health scheme to a friend.
- 95% ranked mock interview preparation as 5 out of 5 on a scale of usefulness.
- 82% ranked their mentor 5 out of 5 on a scale of usefulness.

Academic Year 2021 - 2022

During the academic year 2021 - 2022, a total of 131 students and 54 new mentors participated in the Mentorship to Health scheme. All students consented to the collection of demographic and socioeconomic data regarding their individual and household background. A summary of the data is provided below (Table 5). Furthermore, Health Pioneers collected data regarding perceived barriers to applying to Medical School at UK Universities, grouped below into barriers to successful admission (Table 6) and barriers to applying outside of London (Table 7). When choosing university, 64% of students selected their university based on national ranking, whilst 60% of students also considered how near the university is to their family/current home.



Student Demographics

Gender	79% female, 20% male, 1% non-binary.
Religious belief	57% Muslim, 28% Christian
Ethnicity	32% Bangladeshi, 27% Black African, 2% White British
Eligible for Free School Meals	44%
Household income <£35,000/year	66%
Role as a Young Carer	6%
First in their family to go to University	54%
Estranged from their family	0%
Identifying as having a disability	5%
Part of the Travelling Community	0%
Eligible for Pupil Premium	8% (49% not sure if they were eligible)
Had been in care	0%
Refugees	0%

Table 5: Demographic and socioeconomic data for students (n = 131) engaged with the Mentorship To Health scheme in the academic year 2021 - 2022.

Competition ratios	78%
Lack of work experience	69%
Lack of confidence in UCAS Personal Statement	55%
Feeling generally underprepared for what	53%



university expect from applicants	
I feel there is a lack of adequate mentoring when applying to university	47%

Table 6: Summary of the most common perceived barriers to successful admission to a UK University Medical School (n = 131), academic year 2021 - 2022.

Fear of not fitting in	47%
Fear of living away from home	41%
Fear of racism	40%
Cultural reasons - family wants me to live at home	37%

Table 7: Summary of the most common perceived barriers to leaving London to study medicine at a UK University Medical School (n = 131), academic year 2021 - 2022.

End of scheme evaluation

There are currently 131 students enrolled in the scheme. Evaluation of the scheme with participant feedback will be collected in the same manner as for the academic year 2020 - 2021 cohort.

Participant Feedback

"I found the application process to be overwhelming. The support that the scheme had given me helped me to feel confident within my application but also that I have chosen the right path for me."

"I loved the support with interviews and that really helped me feel confident"



Health Pioneers Charity: Impact Report 2022

"My mentor was very supportive and helpful throughout the process. Also the online sessions were very informative"

"Incredibly interactive and suited to my needs!"

"The advice and support that is given, is priceless and helped me apply strategically. I really felt I was supported and made my medicine application so much easier because I did not feel alone! I am so grateful to my mentors for all of their help!"

"Helped me to plan out the steps I needed to take and having gotten the really good advice I knew how to be strategic, what to expect, what things would be impressive in a personal statement/ interview"



Social Media Team

The social media team is responsible for the maintenance of all social media accounts including: Instagram, Twitter, Facebook and the website (<https://www.healthpioneerscharity.com>). All material is subject to discussion within the social media team, the wider volunteer body and the Trustees, with the responsibility of any publicly shared material being that of the Trustees. Any and all original material containing student work or identifiable information is only used with the permission of those involved.

Research team

The research team is responsible for the data handling and processing of any and all data pertaining to the participants of any scheme within the Health Pioneers charity, both of students and volunteers. All data collected for research purposes are done with full written consent from participants, who are permissible to withdraw their information at any time. Any data processing is done with anonymised data sets and only those with full accreditation with Good Clinical Practice and Disclosures and Barring Service are permitted to handle sensitive or identifiable data.

Financial Review

Total April 2021	£201.74
Voluntary Receipts	£1114.19
Money Spent	£123.82 (Google Suite)



Total March 2022	£1192.11
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Volunteers

Health Pioneers Charity would like to thank all the volunteers who work so hard to deliver a professional, committed and dynamic service to all the students who engage with our programs. Without our volunteers we would not be able to offer such a resourceful and interesting service, nor would we be able to offer assistance and advice to so many students. It is their dedication and hard work that ensures our programs are successful, impactful and enjoyable. In addition we would like to thank Street Doctors for hosting first aid sessions and Queen Mary University and East London NHS Foundation Trust for providing us with resources and venues for our Health and Leadership Weekends.

Structure, Governance & Management

The enrollment and supervision of all volunteers who work with Health Pioneers is supervised by the Trustees. All volunteers are subject to a Disclosure and Barring Service (DBS) check before commencing service with the charity. All healthcare professionals are regulated by and registered with their respective registering body. All students are regulated by professional standards outlined by their respective Universities and Medical Schools, as well as by our charities' policy and governance. Details of the latter can be found on our website.



The Trustees are responsible for making decisions on all matters of general concern as well as how the funds are spent. The Trustees meet on a monthly basis with attendance of all trustees occurring. There are four different teams within the charity (Mentorship to Health, Pathways to Health, Research Team and Social Media Team), which report back to the trustees.

Administrative Information

Ms Ife Akinroyeje, Trustee

Dr Raoul Li-Everington, Chair of Trustees

Dr Devina Maru, Trustee

Dr Yasmin Milner, Trustee

Approved by the Trustees on 28th March and signed on their behalf by Dr Raoul Li-Everington.

Contact Information

Please follow us on all of our social media accounts for the latest updates.

This can be found here:

<https://www.healthpioneerscharity.com/contact-us>