



Edinburgh Mental Health Annual Conference 2024

Navigating Mental Health Research: Uncertainty, Action, Change

Programme

08.00 – 09.00

Registration, Tea & Coffee

09.00 – 09.15

Welcome & Introductions

09.15 – 10.00 **Navigating the Social World in Youth: Loneliness and Social Connections in Mental Health**

Introduction: Prof Daniel Smith

Keynote Speaker: Prof Jennifer Lau, Queen Mary University

Abstract: Loneliness has become a global public health issue. Youth involves multiple social, psychological, and biological transitions. On the one hand, these transitions may create a more uncertain social world with new challenges to navigate, increasing the sense of isolation and loneliness. But on the other hand, heightened orientation to peers and the greater reward value of positive social relationships may help to build resilience against poor mental health. In this talk, I will present novel findings on 1) the frequency and nature of loneliness in young people, including factors associated with more chronic forms of loneliness, 2) the current evidence-base of loneliness interventions for young people and promising new directions in this area, and 3) the more general mental health benefits of social connections for young people and how preventative interventions can harness these benefits.

Bio: Jennifer Lau is Professor and Co-Director of the Youth Resilience Unit based within the Wolfson Institute of Population Health at Queen Mary University of London. She completed her PhD in behavioural genetics at King's College London (KCL) and worked as a post-doctoral researcher at the National Institute of Mental Health in the US. Before coming to Queen Mary, she held faculty positions at the University of Oxford and at KCL. At Queen Mary, Jennifer is Principal Investigator on a number of externally funded projects on mental health and resilience. The Youth Resilience Unit, which was founded through funding from Barts Charity, aims to investigate factors contributing towards resilience (well-being in the face of adversity) and to develop and evaluate interventions that target these factors.

10.00 – 11.00 Panel 1: How do we know what we ‘know’? Thinking across epistemologies and methodologies in global mental health

Introduction: Dr Sumeet Jain **Panel Chair:** Dr Rosie Stenhouse

Speakers: Dr Rosie Stenhouse, Dr Anna Chiumento, Prof Stephen Lawrie, Robyn Thomas, Dr Angus MacBeth, Dr Nadine Seward, and Laila Rajani

Panel Abstract

The field of global mental health is inherently interdisciplinary. This is important for recognising and engaging with the complexity inherent to addressing the challenges of equity that are central to the field. However, the multiplicity of disciplines also raises questions about the ways that different approaches to understanding, and researching, experiences of mental health in diverse global settings can, and should, speak to each other. This panel will involve six 5-minute provocations from academics from a range of disciplines and applying a variety of methodological approaches including bioethics, medical anthropology, mad studies, clinical psychology and implementation sciences. Drawing on their research, panellists will reflect on questions of how we develop knowledge in and about mental health in global settings and with diverse populations, and what this might mean for how we approach research and practice in the global mental health field.

Speaker Abstracts and Biographies**Dr Anna Chiumento, ‘Surfacing normative foundations in Global Mental Health’**

Our ethical orientation to the world acts to motivate our actions in global mental health research and practice. Core values frequently identified as driving action across the global mental health field are social justice, mental health equity, and care. How these values are reflected, and enacted, across everyday engagements with our disciplinary orientations and relational contexts provides insights about how bioethical concepts are being enacted in the global mental health field. This involves asking questions about the equitable inclusion of diverse voices in global mental health discourses, and the strategies adopted and promoted for attaining core ethical values. By carefully attending to everyday experiences of the moral dimensions of global mental health discourse and practice, opportunities are provided for reconsidering how global mental health can attain its stated values-in-action that reflect the messy realities of everyday lives enacted in situated contexts.

Biography: Dr Anna Chiumento is Co-Programme Director and Lecturer for the Global Mental Health and Society MSc Programme. Her research sits at the interface of global mental health, research ethics, and bioethics, employing qualitative and empirical ethics methods. She has published widely in global mental health, and is a steering committee member with the Global Forum on Bioethics in Research.

Robyn Thomas, ‘Lived Experience Collaboration: Filmmaking as Ethnographic Method’

Mad Studies scholars advocate for survivor-led research that is collaborative and reaches beyond the academy. I have spent the past year working on a collaborative ethnographic film with a participant who hears voices, with the aim of centring lived experience and sharing that knowledge with publics. The process provides unique ethnographic insight into understanding states that

might be labelled as mental illness, but can also be experienced as beneficial and valuable to the people experiencing them. Through planning, filming, editing and sharing the film with audiences, new possibilities for collaborative research and ethnographic fieldwork emerge.

Biography: Robyn Thomas is a guest lecturer and PhD candidate in anthropology at the University of Edinburgh, where she graduated from the MSc in Global Mental Health. Her work explores how madness is constructed and experienced, and the beneficial aspects people find in altered states and voice hearing. Her work combines Mad Studies scholarship, lived-experience-led research, Global Mental Health and anthropology.

Prof Stephen Lawrie, ‘Efficacy ‘versus’ Effectiveness’

RCTs are the ‘gold standard of medical experimentation’ (provided they are well done) and are arguably the ‘best’ way of establishing the *efficacy* of a treatment in a condition BUT can put methodological rigour (‘internal validity’) above *effectiveness* in real-world clinical practice (‘external validity’) and are more suitable for drugs than other treatments. RCTs are also very resource and time-consuming, and may delay innovation and devalue alternative therapies. *Implementation science* is the scientific study of methods and strategies that facilitate the uptake of evidence-based practice and research into regular use by practitioners and policymakers. It employs a wide range of methodologies that originate from diverse disciplines. Such approaches are especially suitable for develop and deliver complex interventions, to model how things might work, and thus can be contextually adapted and iterated, to help close the research-practice gap in mental health science. The PROMISE study in Malawi is using implementation science approaches.

Biography: Stephen Lawrie is a Prof of Psychiatry & Neuroimaging and Honorary Consultant Psychiatrist with NHS Lothian. Over the years and decades he has used ‘biomedical’ (genetic, neuroimaging, RCTs etc) and ‘psychosocial’ (eg qualitative, media studies) science approaches to better understand and treat psychosis.

[PROMISE Website](#)

[PROMISE protocol](#)

Dr Angus MacBeth, ‘Research-to-implementation: examining the case of a parenting intervention in Tajikistan’

Scalability of parenting interventions is of global importance, given their promise for both for improving child mental outcomes such a as mental health and education, whilst also improving parental mental health and parenting confidence. However, implementation can be challenging particularly in geographical areas not linked to active research programs, or “not the usual suspects”. We describe the process of developing an evaluation and implementation approach in Tajikistan in partnership with the Mellow Parenting NGO, giving an example of how to develop global mental health research in a region and health/social care system that had not had previous experience with “research into implementation” paradigms.

Biography: Angus MacBeth is a Senior Lecturer in Clinical Psychology in the School of Health in Social Science. He is interested in how mental health risk and resilience factors are transmitted intergenerationally, and how we can use this to develop and evaluate preventative or early intervention approaches for parents, children and communities. His work focuses on global health priorities, sustainable development goals and improving developmental outcomes for the next generation. Angus has worked on parental mental health related projects in the UK, Denmark, Malawi, Chile, Moldova and Tajikistan, and more recently on horizon scanning in mental health with UNICEF Innocenti.

Dr Nadine Seward, ‘Applying divergent approaches to implementation research to generate knowledge to understand how, for whom, and under what circumstances a Caregiver Skills Training Programme improved outcomes (or not) in children with severe learning disabilities in Ethiopia and Kenya’

SPARK is a large clustered randomised trial evaluating the effectiveness of the WHO Caregiver Skills Training to Support African communities to increase the Resilience and mental health of Kids with developmental disabilities and their caregivers in Kenya and Ethiopia. Key to achieving this aim is addressing what works for whom, and under what circumstances using a combination of approaches from divergent disciplines with different ways of thinking and therefore generating knowledge. Social realist/relativist approaches to implementation research (implementation science and social science) are applied to understand the complex phenomena of how diverse contexts influence mechanisms to influence clinical and implementation outcomes. However, this is not enough to inform policy. To help achieve this, the positivist approach of causal machine learning is applied to evaluate key mechanisms interact with one another and the context to improve outcomes at a population level. At the end of the programme we expect to triangulate our findings to better understand how SPARK can be scaled-up across Ethiopia and Kenya.

Biography: Dr Nadine Seward is a Chancellor’s Fellow at the school of Health in Social Science. Her fellowship is focused in developing novel interventions to improve perinatal mental health that in turn will help to improve health across the life span. To achieve this, Nadine will use similar approaches she is applying in SPARK and other research projects. Prior to the CF at Edinburgh University, Nadine worked at KCL as a Lecturer in Implementation Science for different research programmes in Global Mental Health. She also developed and led a module ‘Theory to Practice’ for the MSC in Global Mental Health that aimed to guide students how to design and implement interventions in the ‘real world’.

Laila Rajani, ‘Examining the GMH logics in suicide-prevention programmes in Tharparkar, Pakistan’

Medical anthropology places importance on studying the inner workings and everyday practices that shape the workings of health interventions and how that differs from their intended practice. In my recently concluded fieldwork, I focussed on a set of such interventions in the Tharparkar district of Sindh, Pakistan, where the rising suicide numbers have garnered attention from the international and local health institutions. In my short talk, I use one such intervention, the ‘anti-suicide desks’ at the local police stations, as an entry point to examine ways of knowing and understanding a mental health crisis. Studying the in/coherence between the vision and practice of this small-scale mental health intervention contributes to expanding our understanding of how to mitigate mental health crises.

Biography: Laila Rajani is a PhD candidate at the University of Edinburgh. Her research, funded by the Wellcome Trust, examines the politics of mental healthcare in Sindh, especially in the context of suicide prevention in Tharparkar district.

11.30 – 12.30

Parallel Sessions: Navigating Mental Health Research**Session 1: Pentland East**

Chair: Dr Helen Sharpe

Dr Shawn Bodden, 'Navigating Uncertain Experience: Interdisciplinary Approaches to Understanding Lived Experiences of Seasonal Affective Disorder'.

Abstract: Mental health researchers have increasingly taken seriously the challenge to acknowledge the perspectives and expert knowledge of people with lived experience of mental health issues. Less attention has been given to the ways individuals grapple with uncertainty and self-doubt themselves when trying to understand, voice and respond to their own experiences of mental ill-health. As shown by recent research on the autonomous organisation of 'biosocial' communities – such as the patient-led conceptualisation of 'long Covid' – individuals' understandings and expressions of ill-health develop socially, conditioned by supportive and sceptical responses from others. Drawing on ethnographic data from a series of creative 'Wintering Well' workshops organised within an interdisciplinary research project studying lived experiences of Seasonal Affective Disorder (SAD) in Western Scotland, this paper will reflect on the dynamics of sharing uncertain experiences of ill-health. Since its initial diagnosis in the 1980s, SAD has received significant public attention through an annual 'SAD news cycle', which has contributed to polarised and contradictory understandings of the 'clinical validity' of the condition, as well as who can be said to 'have it'. By examining how experiences of SAD – alike and contradictory, clinical and lived – were shared within the Wintering Well workshops, I will reflect on the values and challenges of translating such a 'plurivocal' understanding of SAD experience into interdisciplinary practical outcomes, including a CBT-based online course for individuals affected by SAD. I will discuss the process of experimentation, exchange and revision our research team developed, in dialogue with clinical practitioners and experts by experience, to create forums for personal and collective voicings of lived experiences of SAD.

Shawn Bodden is a Research Associate in Human Geography at the University of Glasgow. His research focuses on the geographies of community and social processes through which lived experience is expressed, shared and revised.

Hester Parr is Chair of Human Geography at the University of Glasgow. In her research and writing, she considers the geographical dimensions of mental (ill) health and relationships to place.

Hayden Lorimer is Chair of Human Geography at the University of Edinburgh. In his research and writing, he considers the geographical dimensions of place, landscape and practice, in the past, present and future.

Dr Rebecca Helman and Dr Joe Anderson, 'Community-based responses to suicide: An ethnographic exploration across three regions of Scotland'.

Abstract: Community-based, third sector organisations play a key role in supporting people experiencing suicidality and suicide bereavement, particularly within the current climate, where statutory services are failing to meet the demand for mental health care. In order to explore the social and cultural contexts that shape understandings and practices of suicide in Scotland, the Suicide Cultures: Reimagining Suicide Research team has engaged in long-term ethnography with 12 community organisations across three broad and distinct regions over a two-year period. This includes both organisations providing support specifically tailored to people who have attempted or been bereaved by suicide, as well as other forms of community-based support. Our ethnographic investigation has focused on the

conditions within local communities that shape suicidality, through engaging with service users, staff and volunteers. This approach has allowed us to develop nuanced, complex and longitudinal understandings of the social, cultural, political, environmental, economic and interpersonal contexts in which suicide is enacted, understood and responded to. In this presentation we outline some of the key mechanisms through which community-based organisations support people in relation to suicide, including through accompaniment, peer support, group work, one to one therapy, gardening, and walking. We also reflect on some of the challenges that these organisations face in supporting people who have experienced suicide and suicide bereavement, including barriers to accessing groups, providing interventions to a diverse group of service users, and scarcity of resources and funding. Our findings highlight the complex contexts in which suicide is located and the need for responses which meaningfully engage with this complexity in order to better support people who are experiencing suicidality and suicide bereavement.

Rebecca Helman is a Research Fellow on the University of Edinburgh's Suicide Cultures: Reimagining Suicide Research project. Rebecca's work explores the relationships between violence and various intersecting forms of inequality. She holds a PhD in Psychology from the University of South Africa.

Joe Anderson received a PhD in Social Anthropology from the University of Edinburgh in 2020 and is now a research fellow on the Suicide Cultures project in the School of Health in Social Science. Their research has focused on gun rights organisations in the United States and suicide in Scotland.

Sarah Huque is currently a Research Fellow on the Suicide Cultures: Reimagining Suicide Research project. Her research focuses on the intersection of social justice and public health, with an interest in methodological innovation. She holds a PhD in Geography from the University of St Andrews.

Amy Chandler is Professor of the Sociology of Health and Illness. Her research centres qualitatively-driven, sociologically informed studies of suicide, self-harm and mental illness in relation to social inequalities and injustice.

Dr Fiona Duffy, “It’s not all about the money”: Learning lessons about meaningful engagement and ethical considerations from Autistic people with lived experience of eating disorders’.

Background: The Eating Disorder and Autism Collaborative (EDAC) which is an NIHR/MRC/MRF/ESRC/AHRC funded project, aims to develop a UK-wide collaborative network of autism and eating disorder researchers led by Autistic people with lived experience. EDAC ran a series of workshops focusing on how to support meaningful participation of Autistic people with lived experience of eating disorders in research.

Method: 15 Autistic people with eating disorders attended 5 x 1.5 hour recorded focus groups alongside other interdisciplinary researchers and clinicians, one workshop explored barriers and facilitators when co-producing research. Recordings were transcribed and coded using Reflexive Thematic Analysis.

Results: Analysis is still ongoing, therefore the following is an initial summary. 1. “Faux production” - Co-Production needs to take place at the earliest point, not after key research questions have already been decided. 2. Lack of trust in researchers perpetuated by dropping in on communities and lack of transparency in research aims. 3. Communication: Researchers only communicating with individuals they find easy to access and engage rather than meaningful adaptations to communication to support diverse involvement. 4. Language: Stigmatising language and/or concerns from researchers about getting it wrong 5. Limitations in funding, however the importance of skill exchange, academic opportunities or advocacy is underestimated. 6. Structures of support: emotional impact of co-production and unique structures needed to employ peer researchers. 6. Unrealistic expectations in roles and knowledge base.

Discussion: These points will be discussed alongside potential solutions to counteract these barriers which can be extrapolated to neurodevelopmental and mental health research.

Biography:

Dr Fiona Duffy is a Senior Lecturer at Edinburgh University where she is part of the Eating Disorders and Behaviours Research Group, and a Consultant Clinical Psychologist in NHS Lothian where she co-leads the CAMHS Eating Disorder Team. She is the Innovation Clinical Lead for Mental Health in the South-East of Scotland. Fiona is the Co-PI on the NIHR/MRC/MRF/ESRC/AHRC funded New Collaborations to Support Eating Disorder Research Grant: Eating Disorder and Autism Collaborative (EDAC).

Dr Katey Warran, 'CREATE: Cocreating a REsearch Agenda To Facilitate Equitable Dance for Dementia'.

Abstract: Dance is beneficial for those living with dementia in relation to improving quality of life, mental health and wellbeing. However, research has tended to focus on the 'impact' of dance, with less emphasis on improving and understanding research processes. This is, in part, a consequence of the policy landscape which requires dance organisations to demonstrate their societal impact, alongside a limited capacity to engage in understanding sustainable, collaborative methodological ways of working.

Over the last year, we have facilitated workshops to collaborate with researchers, those living with dementia, unpaid carers, dance organisations, and other stakeholders on the development of future priorities in Dance for Dementia research (funded by the RSE). Our focus has been on advancing our understanding of rights-based ways of working and providing a foundation for future equitable research. A video from one of the workshops is available on our [website](#) and we are now in the process of writing up our learnings as a 'collaborative agenda' and recording a podcast series. The key themes of our outputs are: 1) Improving Access to Dance Participation; 2) Prioritising Co-produced Approaches; and 3) Innovation and Creativity in Measurement and Methods.

This presentation will share our process for the cocreation of our collaborative agenda, share our short film, and discuss the key themes of our project. We hope what we share will provide inspiration for future equitable research and funding acquisition.

Biography: Dr Katey Warran is Research Fellow and Deputy Director of the Edinburgh Centre for Research on the Experience of Dementia (ECRED) at the University of Edinburgh. Alongside her post at Edinburgh, Dr Warran is a Research Fellow in the Social Biobehavioural Research Group at University College London and Deputy Director of the World Health Organization (WHO) Collaborating Centre for Arts & Health, based in the group. Her primary research area is 'arts and health', including exploring the role of the arts in dementia care (several projects as Principal Investigator e.g., funded by the AHRC and RSE), dance for young people living with anxiety (as Principal Investigator, funded by the UKRI), singing for those with postnatal depression (with the WHO), singing for those affected by cancer (with the Royal College of Music), and performing arts activities for hospital patients. Dr Warran also has an interest in policy and has contributed to a range of policy reports, including for the DCMS and Arts Council England. She is also on the Research Committee for Scottish Ballet and Co-Directs the Arts Play Health Community.

Session 2: Pentland West

Chair: Dr Sumeet Jain

Dr Maria Gardani, 'Navigating student mental health research and clinical practice in Scotland: Priority setting and future directions'.

Abstract: In recent years, scholars, practitioners, policy-makers and governments have become alarmed at the declining mental health of students in the United Kingdom (UK), highlighting the need for a comprehensive examination of existing knowledge on the subject. So far, UK-wide research networks have proven invaluable in helping to advance research in student mental health and translating it into practice. However, given differences between Scottish and other UK nation higher education contexts, students and higher education stakeholders in Scotland face a unique situation with respect to student mental health. The Scottish Student Mental Health Research Network (ScotSMART) was generated in order to bridge this gap and to facilitate knowledge exchange across researchers in the network, and between the network and stakeholders, across the Scottish Higher Education sector. Co-production is essential in the work of ScotSMART providing opportunities for inclusive work and exploration with students. With two-year funding from the Royal Society of Edinburgh ScotSMART currently have three active sub-groups focusing on Interventions, Neurodiversity and Public Health in relation to student mental health that are supported by student research assistants. We propose a 15-minute talk in which we will outline the need for a student mental health research network and the activities generated so far including annual events, blogpost, reviews of the literature and webinars. Future directions will be discussed based on our experiences.

Biography: Dr Maria Gardani joined the School of Health in Social Sciences at the University of Edinburgh as a Lecturer in Clinical Psychology in October 2021. Prior to that, Dr Gardani was a Lecturer in Psychology at the School of Psychology and Neuroscience, University of Glasgow (2015-2021) and a Lecturer in the DClinPsy programme at the University of Glasgow (2014-2015). During her first post-doctoral fellowship she worked at the University of Glasgow Sleep Center under the mentorship of Prof Jason G. Ellis investigating the transition from acute to chronic insomnia. Following that, I investigated the sleep and circadian difficulties in people after traumatic brain injury and stroke. Dr Gardani was a sleep and research consultant for the Brain Injury Rehabilitation Trust unit in Glasgow (2015-2017) and worked closely with the multidisciplinary team to develop education resources regarding sleep following Acquired Brain Injury.

Dr Amanda Vettini, 'Acute cardiac care for people with severe mental illness following a myocardial infarction among people with a severe mental illness: a qualitative study'.

Aims: To understand patients with severe mental illness (SMI's) heart attack care experiences and to explore any healthcare professionals' (HCPs) challenges in providing their acute cardiac care.

Methods: Semi-structured 1:1 video/telephone call interviews with patients and with HCPs (paramedics, nurses, doctors) in two central-Scotland Health Boards. Patients were recruited by liaising with key organisations e.g. Mental Health Research Network, NRS Primary Care Network and SHARE (Scottish Health Register and Biobank). HCP recruitment was via clinical/research networks, newsletters and professional connections. Interviews were audio-recorded, transcribed verbatim and analysed thematically using NVivo.

Interim Results: Patients outlined challenges of living with a SMI, impacts on daily life and past abuse/trauma. Acute MI cardiac care experiences were mixed; some reported positive experiences, others suffered psychiatric medication delays resulting in a psychotic episode for one. Stigma from staff towards patients with SMI was highlighted. HCPs identified challenges to providing optimal post-MI acute cardiac SMI patient care across 3 key themes: patient-related; practitioner-related and system/environment-related. Barriers included: diminished patient history capacity; effective

HCP-patient communication being time-consuming with insufficient staffing levels precluding the additional time required; medication/ intervention concordance concerns and challenging patient behaviour. Staff expressed fears of appropriately managing patient behaviour; noted stigma towards patients with a SMI and highlighted staff burnout due to length of service and intense workload pressure. Systemic issues included the distressing nature of hospital environments for SMI patients with side rooms not routinely available; woefully insufficient training; challenges accessing the hospital psychiatric team and problems obtaining rarer psychiatric medications potentially impacting patients' mental health stability; a finding echoed in the patient interviews.

Conclusion: Although HCPs aspired to providing optimal acute cardiac care for this patient group, patient-level, professional and systemic barriers often make this challenging. A key area for improvement is providing in-person staff training and improving psychiatric medication access.

Biography: Dr Amanda Vettini is an experienced qualitative researcher and former lecturer with 15 years research experience from a variety of sectors (academic, Government, policy and private). She works in the field of patient healthcare experiences especially in relation to chronic disease and multimorbidity focusing on co-morbid physical and mental health conditions. She has recently undertaken 2 relevant research studies, one on cardiovascular care and cardioprotective prescribing for patients with severe mental illness in primary care and the current study on acute cardiac care for patients with severe mental illness following a heart attack. She has a PhD in Sociology and has also conducted research in higher education, employment and wellbeing.

Dr Kirstie O'Hare, 'Psychotic experiences as a predictor of suicidal thoughts and behaviours: a systematic review and meta-analysis'.

Background: Recent research has highlighted psychotic experiences as a potentially important risk marker for suicidal behaviour. We carried out a systematic review of all longitudinal studies looking at the relationship between psychotic experiences and subsequent risk of suicidal thoughts and behaviours.

Method: Two reviewers searched for original articles that reported prospective associations between psychotic experiences and suicidal ideation, suicide attempts, transition from suicidal ideation to attempts, and suicide deaths. Pooled odds ratios were calculated using a random-effects model. Secondary analyses looked at the mediating role of co-occurring psychopathology, and stratified analyses by the age psychotic experiences were measured.

Results: From 4131 studies retrieved, 20 studies met inclusion criteria. These studies reported on n=80,762 participants from 18 different samples. Individuals reporting psychotic experiences had an increased risk of future suicidal ideation (12 studies; OR = 1.90, 95% CI = 1.65-2.19), suicide attempts (14 studies; OR = 2.95, 95% CI = 2.21-3.94), transition from suicidal ideation to attempts (3 studies; OR = 2.35, 95% CI = 1.16-4.76), and suicide deaths (1 study; OR = 4.39, 95% CI = 1.63-11.80). The association with suicidal ideation appeared to be fully mediated by co-occurring psychopathology (adjusted OR = 1.50, 95% CI = 0.91-2.47), while the association with suicide attempts was increased in excess of what was explained by co-occurring psychopathology (adjusted OR = 2.85, 2.06, 3.95). In age stratified analyses, all associations remained significant regardless of whether psychotic experiences were measured in childhood, adolescence, or adulthood.

Conclusions: Psychotic experiences are an important clinical risk marker for future suicidal behaviours, including the transition from ideation to attempts, and suicide deaths.

Biography: I am a postdoctoral researcher in the Division of Psychiatry at the University of Edinburgh, with research interests in psychosis prediction and prevention, child and adolescent mental health, and administrative data research. I previously worked as a postdoctoral researcher at the University of New South Wales (Australia), after completing my PhD at the University of Otago (New Zealand).

Dr David Gillanders, 'Feasibility and long term follow up of RESTORE: An online Acceptance and Commitment Therapy intervention to improve palliative care staff mental wellbeing'.

Background: Acceptance and Commitment Therapy is a form of Cognitive Behavioural Therapy which uses behavioural psychology, values, acceptance and mindfulness techniques to improve mental health and wellbeing. Acceptance and Commitment Therapy is efficacious in treating stress, anxiety and depression in a broad range of settings including occupational contexts where emotional labour is high. This approach could help palliative care staff to manage work-related stress and promote wellbeing.

Aim: To develop, and feasibility test, an online Acceptance and Commitment Therapy intervention to improve wellbeing of palliative care staff.

Design: A single-arm feasibility trial of an 8-week Acceptance and Commitment Therapy based intervention for staff, consisting of three online facilitated group workshops and five online individual self-directed learning modules. Data was collected via online questionnaire at four time-points and online focus groups at follow-up.

Setting/participants: Participants were recruited from Marie Curie hospice and nursing services in Scotland.

Results: Twenty five staff commenced and 23 completed the intervention (93%). Fifteen participated in focus groups. Twelve (48%) completed questionnaires at follow-up. Participants found the intervention enjoyable, informative and beneficial. There was preliminary evidence for improvements in psychological flexibility (Cohen's $d = 0.7$) and mental wellbeing (Cohen's $d = 0.49$) between baseline and follow-up, but minimal change in perceived stress, burnout or compassion satisfaction. In a long term qualitative follow up, 7 (32%) of the original participants took part in an interview about the 9 to 12 months since they had undertaken the intervention. Those participants described sustained benefits, as well as barriers to implementation that would be important challenges to address in future studies and implementation.

Conclusion: Online Acceptance and Commitment Therapy for wellbeing is acceptable to palliative care staff and feasible to implement using Microsoft Teams in a palliative care setting. Incorporating ways to promote long-term maintenance of behaviour changes, and strategies to optimise data collection at follow-up are key considerations for future intervention refinement and evaluation.

Dr Anne Finucane is a Marie Curie Senior Research Fellow in Clinical Psychology at the University of Edinburgh. Her research focuses on mental health and wellbeing for people impacted by serious life-limiting illness.

Dr David Gillanders is a Chartered Clinical Psychologist and Senior Lecturer at the University of Edinburgh. His research programme explores psychological wellbeing in advanced illness, cancer, and persistent health problems.

13.30 – 14.30

Researching Mental Health With and Through Art

Introduction: Dr Jessica Campbell

Chair: Dr Jimmy Turner.

Jimmy Turner works for the Binks Hub to develop participatory research using artistic and creative methods. An anthropologist focusing on Intersectional Gender Studies, they have collaborated with Brazilian academics, NGOs, and artists to investigate 'Masculinities Otherwise' in Rio de Janeiro through graffiti, dance and contemporary art, and is currently collaborating with community organisations across Scotland on research into mental wellbeing which uses artistic practices such as collage, participatory theatre, and curation.

Speakers: Dr Autumn Roesch-Marsh, Megan Hatcher, Dr Candela Sanchez-Rodilla Espeso

Panel Abstract

In this panel we draw together three researchers from diverse academic, artistic and practice-based backgrounds and positionalities to explore together the role and potential of art in social research into mental health. Through these papers we aim to engage the audience as participants in the creation of openings and pathways towards more innovative, creative and artistic investigations of mental health.

Paper Abstracts and Speaker Biographies

Dr Autumn Roesch-Marsh, 'The value of poetry for Social Workers' mental wellbeing'.

It is well recognised that social workers across the world face high levels of occupational stress and burn out (Burns, 2011; Burns et al. 2019). Social work employers urgently need to explore mechanisms for reducing stress and burnout in order to tackle the associated problems of high turnover and high sickness rates among social workers (BASW 2021). These problems have only intensified since the COVID-19 pandemic (UK Parliament Briefing 2022). This paper explores the findings of a project in Scotland that sought to promote the wellbeing of social workers using poetry for wellbeing workshops. This approach was developed in partnership with the Scottish Poetry Library and built on work undertaken during the pandemic (Critchley and Roesch-Marsh 2020). The project included developing and delivering a series of six poetry for wellbeing workshops, which were co-facilitated by the authors and a poet. The paper will report on the activity of the workshops which included involving participants in reading, writing and sharing poetry which explored themes such as home, grounding, holding on and letting go, change and transformation. The methods for collecting data related to the workshops are outlined, including: participant observation and a creative focus group using poetic elicitation. The findings are explored in relation to four interrelated themes around the value of poetry for social work wellbeing including: empathy and compassion, emotional support, reflection, and recognition. The research adds to a growing evidence base on the value of poetry for social work wellbeing, teaching and reflection across a range of social groups (Kleppe and Sorby, 2018; Lapum et al. 2015).

Biography: Autumn Roesch-Marsh is a social worker and social work academic at the University of Edinburgh. Her work explores the importance of relationships and creativity, both in social work practice and in research.

Megan Hatcher, ‘An Art Psychotherapy based view of clinical spaces, what makes inpatient forensic mental health environments good places to be?’

Although the relationships between physical environment and therapeutic outcomes are complex, it is acknowledged that there may be many positive links between arts interventions in enhancing mental health inpatient environments where psychological intervention and treatment occurs (Rogerson et al, 2021). Literature encourages diverse professionals not to overlook the places and spaces of patient engagement, as significant in the promotion of recovery and wellbeing. Instead of focusing on just therapeutic technique and the therapeutic relationship, for therapists working relationally in inpatient mental health services it may be important to extend our frame of thinking and consider place and space as an explicit and dynamic part of therapeutic practice (Fenner 2011). Viewing clinical spaces as an extension of the therapeutic relationship and more of a therapeutic landscape which is subjectively experienced and that influences patient and staff experience (Boden et al 2019). This presentation will share thinking about spaces in forensic mental health inpatient services and suggest relational and psychological aspects within three main categories for art interventions: making art, displaying art and viewing art. This presentation will present a logic model to consider the relationships between art interventions and outcomes and raise questions around their relationship with patient care and recovery. The speaker will describe a service evaluation that used qualitative methods to present outcomes involving two art psychotherapy led environmental projects undertaken in 2023 in a forensic mental health service in NHS Lothian.

Biography: Megan Hatcher is an Art Psychotherapist working in NHS forensic mental health, forensic learning disability and complex frailty and psychiatric rehabilitation services in NHS Lothian, and recipient of a 2023 NHS Lothian Clinical Academic Research Gateway Award under the First Steps into Research Award stream, for which she was based at the University of Edinburgh. She is part of the NHS Lothian arts psychotherapies team who work across inpatient, community and children and young people services and who aim to help people express and experience themselves and others in different ways, through the use of arts-based activity within a therapeutic framework.

Dr Candela Sanchez-Rodilla Espeso, ‘Creating relational poems: Towards a place-focused Voice-Centred Relational Method’

In this paper I draw from a phenomenologically informed study on the experiences of panic and anxiety, and I discuss how to construct ‘relational poems’ to explore qualitative data. Theoretically, this project draws from geographical and Heideggerian approaches to conceptualising anxiety as a deeply relational, embodied and spatial phenomenon. Research with participants produced a series of interview transcripts and drawings (made during our interviews). Although art-based methodologies have long been used to investigate experiences of mental ill-health; during this project, it became apparent that not many approaches engaged directly with the spatial-relational dynamics of a person’s experience. In this paper, I draw from the voice centred-relational method developed by Carol Gilligan and Lyn Brown and I offer a place-focused relational methodology.

Biography: Candela Sanchez-Rodilla Espeso is a Teaching Fellow in Counselling, Psychotherapy and Applied Social Science at the University of Edinburgh. She is currently a Co-Investigator for REALITIES, an AHRC-funded health disparities project. Her research interests and expertise fall within three areas: a) the concepts of place and space; b) phenomenological and embodied approaches to understanding mental (ill-)health; and c) space design and mobility.

14:30 – 15.30

Implement-ability of Healthcare Interventions in the NHS

Introduction: Dr Helen Sharpe

Speakers: Jennifer Ward, Dr Simona Di Folco, Dr Audrey Millar, and Prof Matthias Schwannauer

Panel Abstract

Beginning with a feasibility study, moving onto a clinical trial design and concluding with a clinical intervention, we will discuss our reflections on introducing new healthcare interventions in the NHS. We will explore how we overcame barriers, attempted to break down suspicions of the ‘new’ and worked to bridge the clinical and research gap through interdisciplinary partnerships in the NHS.

Paper Abstracts

Our first speaker, Jen Ward, will introduce a publication from the iMinds feasibility study carried out in NHS Lothian recently. The methodology used in this study is a qualitative analysis using Normalisation Process Theory framework to explore the introduction of a digital health intervention in CAMHS with an emphasis on young people’s empowerment and agency.

Our second speaker Dr. Simona Di Folco will introduce the IMMERSE study, a randomized control trial that is currently being conducted in healthcare systems across four European countries, including NHS Lothian. The study uses a longitudinal design to explore the uptake of a digital mobile mental health tool based on Experience Sampling Methodology (ESM). One of the main aims of the study is to explore processes, contextual factors, and outcomes of implementing Digital Mobile Mental Health in routine mental health care. As IMMERSE requires both patients and clinicians to take up using the tool, it provides interesting talking points about the inclusion of clinicians in implementing interventions, and the barriers and facilitators this comes with.

Our third speaker Dr. Audrey Millar will speak to her recent publication on the implementation of a therapeutic intervention with bipolar patients in NHS Lothian. This study used a mixed methods approach to determine if mindfulness practice groups are an acceptable intervention in an in-patient rehabilitation setting. Dr. Audrey Millar, as a Consultant Clinical Psychologist within NHS Lothian, can share her experience as an ‘insider’ researcher and the potential effect this had on the outcome of her research.

We will conclude our panel with some reflections for the audience led by Prof. Matthias Schwannauer (Head of School of Health in Social Science, University of Edinburgh). ‘Implementation of a Digital Health Intervention For Young People Exposed to Technology Assisted Sexual Abuse.’



Speaker Biographies

Jennifer Ward: Jen is a Research Assistant in the School of Health in Social Science, University of Edinburgh, currently working across three project iMinds, IMMERSE and CONNECT. She holds an MSc in Psychology of Mental Health from the University of Edinburgh. Jen has previously worked as an Assistant Psychologist for NHS Lothian in CAMHS and in the third sector as a Children's Worker for families affected by substance use.

Simona Di Folco: Simona is a clinical developmental psychologist who currently works as a Postdoctoral Fellow at the School of Health in Social Science, University of Edinburgh. Graduating with a BSc in Science and Psychological Techniques from Sapienza, University of Rome in 2007, Simona's passion for parent-child attachment relationships led to further studies at the Anna Freud Center. With a Ph.D. in Dynamic, Clinical, and Developmental Psychology, awarded in 2014, Simona's expertise includes assessing attachment through methods like the Strange Situation Procedure. Currently, she is a project coordinator for the IMMERSE project, a randomized controlled trial exploring the effective uptake of a digital mobile mental health tool into routine care across four countries in Europe, including Scotland.

Audrey Millar: I am a Consultant Clinical Psychologist working in Edinburgh, and the Psychology Lead for the Mental Health Rehabilitation service, based at the Royal Edinburgh hospital, which works across in-patient and community settings. Our service works with clients with severe, enduring and complex mental health disorders (often on the psychosis spectrum). Psychologists are embedded in multi-disciplinary teams, and our work includes consultative work with teams (such as facilitating formulation meetings, or delivering training on trauma informed practice), as well as direct therapeutic work (both individual and group work) with clients. Our population often find it hard to access traditional psychological therapies, but we have found that mindfulness-based approaches seem to work well in our setting. Since 2018 I have received funding through the NRS to release a day of my time to pursue research in our service. I have lived with my family by the sea in Edinburgh since 2005, and enjoy wild swimming and walking our dog on the beach where we live.

15.30– 15.45

Afternoon Break & Posters

15.45- 16.45

Research as Healing: Building Community as Methodology**Introduction: Prof Daniel Smith****Speakers:** Dr Iona Beange, Josie Tothill, Federica Cologna, Maryanne Jacobs, Jogob Sarr.**Panel Abstract**

This panel discussion, organised by the Community Wellbeing Collective, invites participants to explore the transformative potential of research as a healing process and the urgent need to center community building within research methodologies. By interrogating the traditional boundaries of research and embracing a more inclusive and collaborative approach, we can unlock a profound healing power through our scholarly endeavors.

Drawing on 'Mental Health, Knowledge and Imagining Beyond: Community Created Questions and Methodology' research undertaken by Community Wellbeing Collective members alongside Iona Beange, we will bring together researchers, activists, and community leaders to engage in a dialogue that challenges the dominant narratives surrounding research practices. Together, we will question the hierarchical power structures that often shape academic research, and instead propose methodologies that foster solidarity, empathy, and collective healing. Throughout the panel discussion, we will delve into the ways in which research can become a site of resistance and transformation. By centering the experiences and voices of marginalized communities, we can challenge oppressive systems and generate knowledge that honors the complexity of lived experiences. Moreover, we will explore the ethical dimensions of community-based research, emphasizing the importance of reciprocity and respect in our engagements with communities. Through radical listening, dialogue, and co-creation, we can cultivate research methodologies that empower individuals and foster a sense of belonging and agency within communities.

By attending this panel discussion, participants will gain insights into innovative research practices that prioritize social justice and community well-being. Together, we will imagine a future where research not only produces knowledge but also becomes a catalyst for healing, resilience, and transformative social change. Join us on this intellectual and collective journey towards a more inclusive and healing-centered research praxis.

Speaker Biographies**Jogob Sarr CWC member, Host, Activity Leader, local to Wester Hailes**

Jogob is a care worker and understands the value of self-care, companionship, and the work of maintenance. She has an ambition to start a cleaning company that would create fair work opportunities for migrants. Jogob is also mother of two children and uses her challenges as a parent to support other new parents - she leads coffee mornings for families at the CWC space. She is also a self-taught fashion designer inspired by the style of her home country, Gambia.

Josie Tothill CWC member, Coordinator, Safeguarding Lead, Host, Local to Edinburgh

Josie is a social practice artist who through collective practices of care and building radical organisational infrastructure, she instigates possibilities for togetherness towards collective liberation and systematic change. She has rich experience exhibiting work, performing and

undertaking funded art research opportunities. She is also an experienced care worker and leading member of Care and Support Workers ORGANISE!. In CWC Josie leads on producing monthly 'Anchor Events' co-produced with other members and in partnership with other artists, practitioners and activists.

Federica Cologna CWC member, Host, Activity Leader, local to Edinburgh

Federica is an artist researcher currently doing a doctorate at the University of Edinburgh with the CWC, in which she explores through practice-led research how socially engaged, community-embedded art practices enable dialogue, expand public imagination, create solidarity and re-imagine civic engagement. She is involved in the organisation and facilitation of CWC monthly meetings and public events, and prepares training exercises and workshops to identify questions to work on as a collective.

Iona Beange

Dr Iona Beange has worked in Public Involvement and Engagement for ~20 years, across a broad range of topics. She is currently working with two groups of researchers a) A Wellcome Trust-funded project exploring antidepressants (AMBER) and b) Epic Think Learn C.I.C., which produces resources for parents, teachers and clinicians who care for children with neurodevelopmental conditions. Maryanne Jacobs CWC member, Green Champion, Host, Activity Leader, local to Wester Hailes. Maryanne is a local activist and family mentor passionate about creating green communities and empowering people to actively participate in their communities through creating intergenerational connections. In the CWC space she developed and has been delivering weekly 'Wellbeing Discussions' that support participants to reflect on individual, community, and societal wellbeing through nature-based creative activities.

Maryanne Jacobs CWC member, Green Champion, Host, Activity Leader, local to Wester Hailes

Maryanne is a local activist and family mentor passionate about creating green communities and empowering people to actively participate in their communities through creating intergenerational connections. In the CWC space she developed and has been delivering weekly 'Wellbeing Discussions' that support participants to reflect on individual, community, and societal wellbeing through nature-based creative activities.