the institute of mental health Nottingham

IMH Research Day

Wednesday 24th May 2023

Time: 9.30 – 16.30

Venue: Institute of Mental Health, Triumph Road, Nottingham NG7 2TU

Chairs: Dr Elena Nixon, Dr Blanca De Dios Perez

University of Nottingham UK | CHINA | MALAYSIA

NHS Nottinghamshire Healthcare NHS Foundation Trust

Research Excellence **for Innovation**

Programme

9.30	Registration (foyer) & refreshments (A floor corridor)
10.00	**Introduction and welcome** Dr Elena Nixon, University of Nottingham
10.15	**Outcomes of goal setting support offered at Recovery Colleges: A document analysis** Merly Catherine McPhilbin, University of Nottingham
10.40	**Who benefits most from cognitive rehabilitation for multiple sclerosis?** Lauren Taylor, Institute of Mental Health/University of Nottingham
11.05	**"For the love of God just refer me" - A coproduced qualitative project into the struggles of accessing healthcare services for those living with Tourette Syndrome in the UK** Camilla Babbage, MindTech, University of Nottingham
11.30	Refreshment break and viewing of posters
12.00	**Developing precision computerised cognitive behavioural therapy (cCBT) for adolescent depression: a pilot and feasibility randomised controlled trial (SPARX-UK)** Kareem Khan and Adam Parker, University of Nottingham
12.25	**The co-development of CaTS-App - a digital app to support understanding, assessment and intervention for self-harm** Joanna Lockwood, Camilla Babbage and a sprout (TBC), MindTech, University of Nottingham
12.50	Overview and discussion of (morning) presentations
13.10	Lunch and viewing of posters
14.10	**Patient and Public Involvement & Engagement (PPIe)- Panel Q&A session**
15.10	**Exploring the Impact of Frequent Exposure to Self-Harming Behaviours on the Psychological Wellbeing of Forensic Staff: A Systematic Review** Emma Gray, University of Nottingham
15.35	**Prisoner suicide(s): the experiences of and impacts on prison healthcare staff** Sara Hyde, University of Nottingham
15.50	Short break
16.00	Overview and discussion of (afternoon) presentations
16.20	**Announcements:** **Best oral and poster prize winners** **IMH Public Advisory Group Award**
16.30	Close of Day 2

List of poster presentations

Poster 1	**Not presenting**
Poster 2	**Exploring the characteristics of young people affiliated to a gang** Stacey Eyers, University of Nottingham
Poster 3	**Comparing negative outcomes of ACE's and racial trauma between Caucasian and Ethnic minority individuals** Roisin Roza Reid, University of Nottingham

Poster 4	**The relationship between impulsivity, aggression, and childhood trauma in the general population: An online survey** Olivia Ann Aubrey, University of Nottingham
Poster 5	**Not presenting**
Poster 6	**Exploring The Relationship Between Burnout and Moral Injury in the UK Police and What Barriers to Seeking Help Exist: A Mixed-Methods Approach** Natalie Bloom, University of Nottingham
Poster 7	**The impact of COVID-19 on Recovery Colleges in England: Qualitative multi-site study** Simran Sahiba Kaur Takhi, University of Nottingham
Poster 8	**Visual Processing Speed and Its Association with Dementia Diagnosis in a Population-based Prospective Cohort: EPIC-Norfolk** Ahmet Begde, Loughborough University
Poster 9	**Examining representation of hearing loss and its impact on mental health in the UK media** Sophie Fawcett-Jones, University of Nottingham
Poster 10	**Engagement with digital mental health and wellbeing interventions from the perspectives of researchers, developers, and users.** Laura Williams, Institute of Mental Health/University of Nottingham/National Institute of Health Research MindTech MedTech Co-operative
Poster 11	**Predictors of Technology Interest and Memory in Older Adults: Results from CFAS-II** Manisha Jain, Loughborough University
Poster 12	**Barriers to the inclusion of underserved groups in research about co-existing dementia and hearing conditions: An experience-based co-design study.** Clare Burgon, University of Nottingham / NIHR BRC (hearing)
Poster 13	**Review of toolkits and frameworks for promoting the inclusion of underserved groups in research about co-existing dementia and hearing loss.** Phoebe Beale, University of Nottingham
Poster 14	**Not presenting**
Poster 15	**Do clinical psychologists have a role in clients' use of psychotropic medication? A mixed methods investigation exploring current forms of involvement** Amy Aston, Nottinghamshire Healthcare NHS Foundation Trust

Welcome

We are delighted to welcome you to the Institute of Mental Health's 2023 Research Days.

This is our 10th IMH Research Day event, and we look forward to hearing the highlights of the work of the Institute's doctoral candidates, Managed Innovation Networks (MINs), and our early-career researchers.

This event celebrates the breadth of ideas and research work currently taking place within the Institute of Mental Health, and offer an opportunity to present, share and discuss research with colleagues and peers from across the Institute and our partner organisations.

Over the next two days we will have oral and poster presentations from many of our early-career researchers and for some this will be the first chance they have ever had to present their work in public. Creating a research-active and supportive environment is an important function the Institute can perform in nurturing up-and-coming research talent, and I am delighted to see such a variety of research themes and ideas in this year's programme.

In addition to the oral and poster prizes we award at the end of each day, this year we have added two new prizes – our IMH Public Advisory Group Award, and our award for Best Contribution to Research Facilitation or Delivery (which will receive our newly launched IMH Star Award this year). These awards look at different aspects of a research project – highlighting good practice and activities to involve patients and the public in research design; and recognising the contribution made by a variety of support teams that work together to deliver a successful research project.

We are also renaming our poster presentation prize in honour of our Research Day long term organiser and supporter, Professor Peter Bartlett. Peter is retiring from the University of Nottingham this year, so we wish to thank him for his unwavering support and leadership of these events over the years. "The Peter Bartlett prize for Best poster presentation" will be awarded every year and ensure that Peter's huge contribution to these events continues to be noted for years to come.

My thanks to the organisers of this year's events: Dr Elena Nixon, Dr Blanca De Dios Pérez, Karen Sugars, Kate Horton, the Institute's Advisory Group members and Public Contributors, Lou Rudkin and Prof Peter Bartlett. Without their hard work and efforts, none of this would be possible.

I wish all our Research Day presenters the very best of luck and I hope all our attendees find the event rewarding and enriches their ongoing research work.

Professor Martin Orrell
Director, Institute of Mental Health

Housekeeping

Refreshments and lunch
Refreshments and lunch will be provided throughout the day in our ground floor corridor.

If you have notified us of any specific dietary requirements, then your lunch will be named or alternatively platters will be named for that specific requirement (e.g Vegan, vegetarian etc)

Toilets
Please use the toilet facilities located in the ground floor reception area. Please speak to a member of our reception team if you have any additional needs that we can help with.

Tweet us!
We'll be tweeting from the Institute's Twitter account throughout both days – follow us **@institutemh** and use the **#IMHRD23** hashtag.

Photography
we'll be taking photos throughout both days to celebrate the Research Days. If you'd prefer not to appear in any photos, then please let our Communications team know or mention it to anyone you see with a camera.

Feedback survey and certificates of attendance
All delegates who have attended will receive a link to complete an online feedback survey shortly after the events have finished. Certificates of attendance can be requested during completion of the survey.

Research Day prizes

- **The Craig Dixon memorial prize for Best oral presentation**
- **The Peter Bartlett Best poster** – voted for by the event delegates.

We also have two new awards this year:

- **IMH Public Advisory Group Award –** judged by the Institute of Mental Health's Advisory Group members.

  (This award will be presented at the end of the second day.)

- **IMH STAR award – Best Contribution to Research Facilitation or Delivery -** launched this year to recognises the best contribution to any aspect of an IMH research project's facilitation and/or delivery by individuals outside a given research team. Nominations could be made for a named individual working in a team involved in supporting research facilitation and/or delivery, e.g. staff working in Research and Development, Research and Evidence, Research Delivery Team, Clinical Research Networks, Research Grants and Contracts, Research Operations; and other relevant research support services. Nominations could also be made for a named individual contributing to research through Patient and Public Involvement and Engagement groups.

  (This award will be presented at the end of the first day.)

2022 Publication Awards –

A. Best overall publication
B. Best publication when the author has published no more than six previous publications
C. Best publication flowing from work during doctoral studies or as part of a doctoral dissertation
D. Best publication by an employee of Nottinghamshire Healthcare NHS Foundation Trust who does not have a substantive contract with a university
E. Best publication by an employee of the Nottinghamshire Healthcare NHS Foundation Trust or the University of Nottingham, co-authored with a person with lived experience of mental distress or a current or former user of mental health services
F. Best publication (including blog posts, newspaper articles, or similar) by a person with an affiliation to the Institute of Mental Health who has lived experience of mental distress or is a current or former user of mental health services

(These awards to be announced at the end of the first day)

What is the IMH blog?
Set up by postgraduates within the Institute of Mental Health in 2012, the blog is a multi-author, cross-disciplinary forum which encourages conversation about issues related to mental health, integrated healthcare, lived experience and wellbeing.

At present the blog is edited and managed by the Institute's Communications team, but it would be great to have a few more IMH researchers involved.

Please get in touch with the Communications team for more information about submitting a blog or joining the editorial team: lou.rudkin@nottshc.nhs.uk

What is Patient and Public Involvement?

Meet Kate Horton, the Institute of Mental Health's Public Involvement Co-ordinator.

At the Institute we encourage Patient and Public Involvement to be considered from the first concept of research. In the same way a research idea will come to life with multiple experiences and specialisms, someone who lives these experiences can add a reality and richness to any question.

Within any grant application or bid, PPI will be raised and how you will involve people will be questioned. These early questions will include:

- What's the question investigated – can you explain this in lay language?
- Do people with lived experience of this topic share your interest in this research question?
- Who are your "people" in PPI conversations and how do you communicate with them?
- How will you authentically involve them into your research process?

Good quality Patient and Public Involvement means much more than that initial review of documents and helping with a Plain English Summary. It is finding ways to involve lived experience, real voices all across the whole cycle of the research. It's about working with experience and lived knowledge to add value to the research. It's also about creating space and respectful, meaningful involvement for those public contributors you work with.

There is no one way to do "PPI" the right way. It fits with the people it involves, the direction of the research and it flourishes best where this additional value, respectful involvement exists.

Also it is always worth bearing in mind, for those bringing lived experience to research, being 'Involved' is not access to therapy, medical or clinical care. It does not, unfortunately, fast track anyone to answers or extra help for their own experiences. Many public contributors get involved in research not to improve their own experiences but to improve the experiences of those who come after them. To see improvements and developments in services and research long after their own interactions with that system. It's often an altruistic and awkward process to be part of, often shifting from one thing to another swiftly, without the same equipment, systems and knowledge of everyone else in the room – virtual or otherwise.

The Institute of Mental Health is committed to seeking positive involvement for patients, public, carers, service users and interested peers in our research and wider activities and we actively seek to support researchers to do this in the best way possible. To find out more visit **www.institutemh.org.uk/involvement**

Library and Knowledge Service - Nottinghamshire Healthcare NHS Foundation Trust

Nottinghamshire Healthcare's Library and Knowledge Service provides a comprehensive library and information service to Trust and Institute of Mental Health staff. Our services underpin healthcare practice, organisational management, research, lifelong learning and continuing professional development in the Trust.

Our services include:

- An evidence search service.
- Training sessions on using e-resources.
- A large collection of books and journals.
- Access to online databases, books and journals.
- A range of current awareness resources.
- Journal club facilitation.
- Management of the East Midlands Evidence Repository (EMER).
- A document supply service to help you access full text of journal articles.
- Hot desk space with access to NHS WiFi, computers and docking stations and printing and photocopying facilities (Duncan Macmillan House).

We have three libraries, one at Duncan Macmillan House and further sites at Rampton and Wathwood.

Duncan Macmillan House Staff Library:	**Rampton Staff Library:**	**Wathwood Staff Library:**
• Monday to Thursday, 8:45am to 5pm • Friday, 9am to 4pm	• Monday to Thursday, 9:00am to 4:30pm • Friday, 9:00am to 4pm	• Monday to Friday, 9:00am to 5:00pm

Please email us or call 0115 9529486 if you have any queries. For information about joining the library or to see more about the services we provide, please visit our Connect pages or our web pages.

Patient and Public Involvement & Engagement (PPIe)- Panel Q&A session

We will be hosting a 45-minute Q&A panel with experienced public contributors affiliated to the Institute. This will not be a session to explore individual lived experiences within mental health but a Q&A opportunity to explore the public contributor perspective in research, offering advice on creating and sustaining quality PPI within research and understanding more about how this could be successfully carried out in your own research.

Oral presentation abstracts
(in order of the programme)

Time of presentation	10.15
Presenter	Merly Catherine McPhilbin
Job title and affiliation	Research Assistant, University of Nottingham
Names and affiliations of co-authors	Holly Hunter-Brown (King's College London), Simran Takhi (University of Nottingham), Yasuhiro Kotera (University of Nottingham), Benji Ingall (University of Nottingham), Mike Slade (University of Nottingham), Fiona Ng (University of Nottingham)
Title of talk	Outcomes of goal setting support offered at Recovery Colleges: A document analysis
Abstract	Goal setting and action planning includes formulating goals, action plans, coping plans, and follow-ups to support goal achievement, an important outcome in mental health recovery. Recovery Colleges (RCs) are a widespread initiative to support mental health recovery, yet no multi-site research has investigated the support offered to enrolled students to set and achieve goals. This study aimed to create a typology of the support offered by RCs to enrolled students to set and achieve goals. A document analysis of publicly available text and web-based resources relating to course content on RC websites was employed following the READ approach. Websites were identified from a systematic web search. Structured Tabular Approach to Thematic Analysis (ST-TA) on brief texts was applied to eligible documents using a hybrid inductive-deductive approach. Documents from 79 RCs were collected (N = 782). Eligible documents (n = 61) were extracted from 40 RCs. Preliminary analysis indicates that Recovery Colleges offer support for students to formulate goals, action plans, and coping plans, and offer opportunities to follow-up on goal achievement progress. This support is offered through workbooks and across group and 1-1 courses, sessions, or workshops centring on four topic domains: (1) physical health, (2) mental health and wellbeing, (3) meaning making, and (4) discovering pathways. A variety of Recovery Colleges in England provide optional 1-1 or group courses to specifically support individuals to set and achieve goals and/or incorporate elements of goal setting and action planning into their courses.

Time of presentation	10.40
Presenter	Lauren Taylor
Job title and affiliation	PhD Candidate, Institute of Mental Health, University of Nottingham
Names and affiliations of co-authors	Prof Roshan das Nair (1, SINTEF Digital, Norway; 2, University of Nottingham), Dr Nikos Evanglou (1, University of Nottingham; 2, Nottingham University Hospitals NHS Trust), Dr Jacqueline Mhizha-Murira (University of Nottingham)

Title of talk	Who benefits most from cognitive rehabilitation for multiple sclerosis?
Abstract	**Background**: Multiple sclerosis (MS) is a chronic inflammatory condition of the central nervous system characterised by lesions throughout the brain and spinal cord. Up to 70% of people with MS (pwMS) experience cognitive difficulties which are debilitating and reduce the quality of life of pwMS and their families. Cognitive rehabilitation is a type of therapy that can help manage cognitive difficulties. **Objectives**: This project aimed to establish the effectiveness of cognitive rehabilitation for pwMS and understand which groups of pwMS are most likely to benefit from this intervention. **Methods**: This PhD involves three main studies: (1) a Cochrane review investigating the effectiveness of cognitive rehabilitation for MS, (2) an analysis of the CRAMMS trial data to identify factors that may predict how likely a person with MS is to benefit from cognitive rehabilitation, (3) a feasibility randomised controlled trial (RCT) to assess the feasibility and acceptability of an online group-based cognitive rehabilitation programme. **Results**: The Cochrane review showed that improvements in subjective memory and quality of life were sustained long-term, thus supporting the effectiveness of cognitive rehabilitation for pwMS. Study two suggested that the socio-demographics and clinical characteristics of pwMS can predict how likely they are to benefit from cognitive rehabilitation. We will test these findings in study three, which is currently ongoing. **Conclusion**: This research demonstrates strong evidence to support the effectiveness of cognitive rehabilitation for pwMS. Furthermore, we can predict which pwMS are most likely to show significant improvements in neuropsychological function following group-based cognitive rehabilitation.

Time of presentation	11.05
Presenter	Camilla Babbage
Job title and affiliation	Research Fellow, MindTech, University of Nottingham
Names and affiliations of co-authors	Bethan Davies (University of Nottingham), Jennifer Salvage (University of Nottingham), Emma McNally (Tourettes Action), Paul Stevenson (Genius Within), Seonaid Anderson (Neurodiverse-org), Marie Ralph, Daniel Jones (Tic-Hull Yorkshire, Newcastle University), Maddie Groom (University of Nottingham)
Title of talk	“For the love of God just refer me” - A coproduced qualitative project into the struggles of accessing healthcare services for those living with Tourette Syndrome in the UK
Abstract	Tourette Syndrome (TS) affects 1% of people and causes tics, involuntary movements, and vocalisations. Living with tics leads to reduced quality of life and increased risk of mental health difficulties. Evidence-based treatments exist for TS however there are currently no UK medical guidelines for TS and access to care around the country is sparse. We explored the lived experience of accessing healthcare for children, parents of, and adults with tics to inform scientific and

	public understanding. Participants were recruited to take part in 1) an online focus group and 2) if desired, to share their audio with Woven Ink, an animation company, who would co-design an animation video based on the data. Focus groups, led by a lived experience project partner and facilitated by researchers, explored the impact of living with tics, experiences accessing healthcare and symptom management. Data was analysed using reflexive thematic analysis. Seven separate focus groups were organised with 10 parents, 10 adults, and 3 young people. In total, five themes were developed, two related to how the healthcare system and healthcare professionals do not support people with TS, three themes identified the need for having a TS diagnosis, experience of treatment options and managing TS at home. The animation was shared and reached over 500,000 people during its launch: https://www.institutemh.org.uk/research/candal/about-candal/1670-candal-team-up-with-tourettes-action-to-campaign-for-better-services . This coproduced research project captures the realities of accessing healthcare for those living with TS, highlighting areas of need in healthcare through thematic analysis, which is further illustrated by the animation video to raise public awareness.
Time of presentation	12.00
Presenter	Kareem Khan[1] and Adam Parker[2]
Job title and affiliation	[1]Research Fellow, University of Nottingham [2]Research Assistant, University of Nottingham
Names and affiliations of co-authors	Camilla Babbage, Charlotte L Hall, Chris Greenhalgh, Mathijs Lucassen, Sally Merry, Kirsty Sprange, Karolina Stasiak, Christopher Tench, Paul Stallard, & Chris Hollis
Title of talk	Developing precision computerised cognitive behavioural therapy (cCBT) for adolescent depression: a pilot and feasibility randomised controlled trial (SPARX-UK)
Abstract	Adolescent depression has become a pressing public health issue with a recent increase in rates globally. Cognitive Behavioural Therapy (CBT) is recommended as first-line treatment for adolescents with depression; however, access is low. Due to their affinity for technology, one promising avenue to increase access to evidence-based treatments is through serious games. SPARX is a serious game teaching CBT skills in a virtual world developed and trialled in New Zealand. Studies using SPARX have shown efficacy in other nations though it has never been trialled in the UK. We aim to conduct the first pilot feasibility randomised controlled trial (RCT) exploring the use of SPARX in child and adolescent mental health services (CAMHS) and school-based Mental Health Support Teams (MHSTs) in England. This 3-arm trial, co-produced with young people, will explore whether SPARX supported by an e-coach improves adherence and engagement compared with self-directed use, with the final arm a waitlist control group. A total of 120 adolescents (11-19 years) will be recruited. Assessments, including depression and anxiety symptomology, will be conducted online at baseline, week 4, and 8-10-weeks post-randomisation. Feasibility data will be collected throughout. In addition, an embedded process evaluation including qualitative interviews will be conducted to gain a more in-depth understanding of participant responses to the intervention and potential modifications to the trial design. Results from the trial will ultimately be used to inform a larger definitive RCT, including sample size calculation, optimal mode of delivery, and the most appropriate setting for SPARX.

Time of presentation	12.25
Presenters	Joanna Lockwood and Camilla Babbage and PPI TBC
Job title and affiliation	Research Fellows and PPI member, MindTech University of Nottingham
Names and affiliations of co-authors	Camilla Babbage, University of Nottingham; Ellen Townsend, University of Nottingham; Sprout TBC
Title of talk	The co-development of CaTS-App - a digital app to support understanding, assessment and intervention for self-harm
Abstract	Few evidence-based interventions or assessment approaches exist to support young people who self-harm and most have not been co-produced. A new tool – the CaTS-App - offers a systematic way of charting how multidimensional risk and protective factors interact in the build-up to self-harm. It draws on an existing co-designed research tool (the Card-sort Task for Self-harm; CaTS) that uses a card-sort methodology. We are co-developing, testing and evaluating an app prototype to be delivered on smartphone or tablet for use by frontline professionals working with young people. Here we describe our process to co-develop the tool with young people and stakeholders, using an embedded PPI, collaboration, and co-production mindset. This involves establishing a PPI group of young people with lived experience (Sprouts), foundational engagement work with key stakeholders, and co-production workshops ahead of prototype development and refinement. **Finding**: In Year 1 Sprouts completed both offline and online tasks. We describe the approach to joint safety planning, establishing ground rules and partnership across the research lifespan, and further engagement and research activities with key stakeholders. We describe members' views and expectations on being involved in research of a sensitive nature. **Discussion**. Co-produced digital tools that support shared understanding and decision making between frontline professionals and young people about self-harm, will improve self-harm recovery and suicide prevention. Embedded approaches to PPI and stakeholder involvement, including early consideration of implementation and user needs, lead to greater fitness for purpose, satisfaction, and improved outcomes in digital innovation, and are widely applicable.

Time of presentation	15.10
Presenter	Emma Gray
Job title and affiliation	Trainee Forensic Psychologist, University of Nottingham
Names and affiliations of co-authors	None given
Title of talk	Exploring the Impact of Frequent Exposure to Self-Harming Behaviours on the Psychological Wellbeing of Forensic Staff: A Systematic Review
Abstract	It is noticeable that staff working in secure settings respond differently to frequent exposure of self-harming behaviours. This systematic review is concerned with the psychological impact that frequent exposure to self-harm has on individuals working in secure-forensic settings and prisons. This was operationalised using a PEO search framework to search the following databases: PsychINFO, Medline, Embase, Scopus database, Web of Science, PROQUEST, Campbell Collaboration Library, and ASSIA. A total of 4679 studies were retrieved, 10 of which matched the inclusion criteria. The methodological quality of each study was

	then assessed using a structured scoring system. The studies identified that staff experienced emotional reactions including shock, panic, anger, frustration, distress, guilt, and lack of confidence. Some staff reported feeling desensitised following witnessing subsequent incidents. Nightmares and flashbacks were also experienced by some members of staff. Some staff reported feeling unable to access support at work, whilst others actively avoided support services. Coping strategies included attending training to make sense of self-harm, gallows humour, and avoidance strategies. It is clear that staff working within secure settings have different emotional responses to exposure to self-harming behaviours, which presents in different ways among disciplines and different settings.

Time of presentation	15.35
Presenter	Sara Hyde
Job title and affiliation	PGR, University of Nottingham
Names and affiliations of co-authors	None given
Title of talk	Prisoner suicide(s): the experiences of and impacts on prison healthcare staff
Abstract	Prison suicide has remained at elevated levels for over a decade. There is extant literature about the impacts of this on prison officers, but their co-workers in prison healthcare teams have received little attention (Bell et al., 2019; Roulston et al., 2020). This cohort of staff working with patients in the restrictions of a prison regime, are often exposed to high levels of suicide attempts and self-harm. Adopting a processual ontology and using qualitative, semi-structured interviews, this study explores these experiences and the impacts - the immediate, enduring, and cumulative impacts – that this has on prison healthcare staff. This paper will present initial findings that are being written up into a PhD during 2023 on the experiences and impacts of prisoner suicide(s) on prison healthcare workers. They will include emotions experienced (anxiety, distress, shock, sadness, hopelessness, helplessness), acclimatisation, questioning professional competence and regret and rumination. The paper will also consider the enduring impacts on staff who have experienced prisoner suicide, including attendance at coroner's court, with indicative findings including desensitisation, malignant alienation, and erosion. Finally, it will consider how these experiences impact practices and culture, early findings include: risk aversion and defensive practice, minimising and narratives that make this work palatable. These findings have potential consequences for practice and better staff support and training, as well as for policy makers considering how to sustain a compassionate and professional workforce, to ultimately aid the reduction of prisoner suicide and self-harm.

Poster presentation abstracts

Poster 1 not presenting

Poster number	2
Presenter	Stacey Eyers
Job title and affiliation	Trainee Forensic Psychologist, University of Nottingham
Names and affiliations of co-authors	Professor Kevin Browne and Dr Elizabeth Paddock University of Nottingham)
Title of talk	Exploring the characteristics of young people affiliated to a gang
Abstract	Research has aimed to identify risk factors for youth gang membership. However, youth involvement with gangs continues to rise, thus, warranting further research in this domain. This study compared gang associated youth offenders (GAYO) with non-gang associated youth offenders (NGAYO), to identify what characterises individuals who get involved with youth gang membership. The sample consisted of 593 young offenders (81 GAYO and 512 NGAYO) from Nottingham's Youth Justice Service (YJS). Data was obtained from AssetPlus risk assessments. Results indicated GAYO were significantly more likely to have concerns regarding mental health, substance misuse, accommodation, absconding, trust, manipulation, foregoing to peer pressure, offending in school and being a victim of parental abuse. Additionally, trends suggested that GAYO were more likely to have had a child protection plan, physical health concerns, parents with health concerns, problems relating to others and problematic attitudes toward ETE. Trends also revealed GAYO were more likely to have witnessed domestic violence or abuse, been a victim of parental violence, been exposed to violence in wider family, be at risk of sexual exploitation and experienced loss of contact with people significant to them. Logistic regression analysis successfully classified between GAYO and NGAYO. The findings have implications for assessing a young person's risk for gang membership. Characteristics identified could be used to develop targeted interventions for youth gang membership. It is crucial for prevention and intervention strategies to be evidence-based and trauma-focused, if we wish to remediate the effects and reduce youth gang membership.

Poster number	3
Presenter	Roisin Roza Reid
Job title and affiliation	DForenPsy Student/Forensic Psychologist in Training, University of Nottingham
Names and affiliations of co-authors	Dr Nigel Hunt, University of Nottingham
Title of talk	Comparing negative outcomes of ACE's and racial trauma between Caucasian and Ethnic minority individuals
Abstract	Adverse Childhood Experiences (ACEs) research has been criticised for disregarding ethnic minority adversity. (Bernard et al., 2020). Yet, ethnic minorities

	are disproportionally more likely to experience negative life outcomes (Sturge., 2020). The few studies found Black youth report more ACEs, but did not identify why (Bernard et al, 2020). Cronholm et al (2015) furthered this by investigating an 'Expanded ACEs framework' and found intersectional demographic characteristics increased an individual's risk to experience ACEs. Yet, an inadequate assessment of racial discrimination was used, whilst others suggest this should be termed as racial trauma to capture its' devasting effects (Bernard et al., 2020). Therefore, the current study aims to compare the prevalence of expanded ACEs, racial trauma, and negative life outcomes (Mental health, substance misuse, Anti-Social Behaviour) between ethnic groups. It proposes to advance previous research by employing a comprehensive assessment of racial trauma. Participants completed a cross-sectional online study via a convenient sampling method. Participants completed several questionnaires: a demographic questionnaire also assessing their substance use and mental health; ACES (ACE-IQ) (WHO, 2018); racial trauma (adjusted-RRES) (Waelde et al., 2010) (TSDS) (Williams et al., 2018); and ASB (STAB) (Burt & Donnellan, 2009). Several participants have been recruited thus far, with completion expected by May 2023. Hence, the results are pending. It is anticipated ethnic minorities' will exhibit higher levels of all assessed variables and their experiences of ACEs and racial trauma will operate similarly to predict negative life outcomes. Thus, suggesting racial trauma should be defined as an ethnic minority-specific ACE.

Poster number	4
Presenter	Olivia Ann Aubrey
Job title and affiliation	Trainee Forensic Psychologist, University of Nottingham
Names and affiliations of co-authors	None given
Title of talk	The relationship between impulsivity, aggression, and childhood trauma in the general population: An online survey
Abstract	The societal, economic, and personal costs of aggression are indisputable. Research literature supports the roles both impulsivity and childhood trauma have on aggression, however, less is known about the mechanisms causing these associations. Current theory suggests traits of impulsivity may act as a mediating factor between childhood trauma and aggression in adulthood. To investigate this trend, the current study was designed to assess associations between retrospective childhood trauma, impulsivity traits and aggression within the general population. A total of 179 participants (110 female, 65 male) of the UK adult population completed an online survey. The survey involved questionnaires which collected information about impulsivity (Short UPPS-P), childhood trauma (Childhood Trauma Questionnaire), aggression (Buss & Perry Aggression Questionnaire) and a task measuring delayed gratification (Kirby Delayed Discounting Task). Results showed a common theme of the impulsivity facet 'negative urgency', suggesting that impulsivity during negative emotions is associated with the behaviour, emotions, and cognitions of aggression. This study also found a distinct effect of both impulsivity and emotional abuse on physical aggression, which may reflect a pathway in which impulsivity mediates childhood

	trauma and future violence. Findings showed that associated factors differed depending on the aspect of aggression, therefore appearing to have potentially distinct pathways. This study discusses reasons for these observed results and future research.

Poster 5 no longer presenting

Poster number	6
Presenter	Natalie Bloom
Job title and affiliation	Trainee Forensic Psychologist, University of Nottingham
Names and affiliations of co-authors	Dr Shihning Chou and Dr Jade Kettlewell (University of Nottingham)
Title of talk	Exploring The Relationship Between Burnout and Moral Injury in the UK Police and What Barriers to Seeking Help Exist: A Mixed-Methods Approach
Abstract	This research considers the psychological wellbeing of UK police employees and barriers that stop them seeking help when they may need it. Study 1 explores whether there is a relationship between burnout and moral injury. Burnout is characterised as chronic workplace stress that has not been sufficiently managed. Moral injury is a response to an action, or inaction, which violates a person's deeply held moral beliefs and values. Research suggests that burnout and moral injury are phenomena which affect those in the police, but the two concepts have not been looked at in conjunction with one another. Organisational and occupational stressors will also be considered in study 1. Study 2 is concerned with barriers to help-seeking within police employees. Research suggests that stigma, shame and the culture of policing may prevent staff members seeking help for their mental health when they need it. Semi-structured interviews will aim to offer insight into the lived experience of police employees and why they may feel unable to ask for help. Data for study 1 has been collected through anonymous online surveys. Participants were given the option to leave contact details to participate in study 2 in which they were invited to an online interview. Data collection has just been completed and results are expected around April 2023. This research hopes to contribute to the lacking literature around psychological wellbeing of police employees in the hope that interventions may be developed to target areas found to be particularly difficult.

Poster number	7
Presenter	Simran Sahiba Kaur Takhi
Job title and affiliation	Research Assistant (RECOLLECT 2) Project, University of Nottingham
Names and affiliations of co-authors	Merly McPhilbin, Vanessa Lawrence, Danielle Dunnett, Holly Hunter-Brown, RECOLLECT2 LEAP
Title of talk	The impact of COVID-19 on Recovery Colleges in England: Qualitative multi-site study
Abstract	The Covid 19 Pandemic has had a global impact on the way in which mental health services are delivered. Recovery Colleges (RCs) are a widespread, peer-support orientated initiative to support mental health recovery. This this is the first study to explore in depth, the impact of the COVID-19 pandemic on the operation of multiple Recovery Colleges within the UK.

	This study aimed to investigate how the COVID-19 pandemic and lockdown restrictions in England changed the operation of Recovery Colleges and how these changes have impacted the experiences of Recovery College students. Qualitative interviews were conducted with 31 Recovery College managers. Interview schedules were collaboratively designed by individuals with lived experience of the COVID-19 pandemic impacting on Recovery College operation. Interviews were recorded and transcribed. A thematic coding framework was created, based on multiple observations about the impact of COVID-19 on Recovery Colleges following the familiarisation of two interview transcripts. The refined framework was applied to the remainder of the transcripts. The emergent framework consisted of five superordinate themes: (1) complex organisational relationships, (2) Changed ways of working (3) Navigating the rapid transition to digital delivery (4) Responding to loneliness and isolation in lockdown and (5) changes to accessibility. The rapid transition to digital delivery during the pandemic was shown to serve three key benefits (1) overcoming digital poverty barriers to mental health service (2) greater connections between health professionals and lived experience experts and (3) mental health prevention through accessible hybrid face-to-face and digital course delivery.

Poster number	8
Presenter	Ahmet Begde
Job title and affiliation	Doctoral Researcher, Loughborough University
Names and affiliations of co-authors	Manisha Jain (LU), Thom Wilcockson (LU), Eef Hogervorst (LU)
Title of talk	Visual Processing Speed and Its Association with Dementia Diagnosis in a Population-based Prospective Cohort: EPIC-Norfolk
Abstract	**Introduction**: Visual processing deficits are frequently observed in individuals with dementia, which suggests their potential utility in early dementia diagnosis. Methods: The study uses EPIC-Norfolk data (n=8623) to test the accuracy of the Visual Sensitivity Test (VST) in diagnosing dementia compared to gold-standard dementia screening tools using ROC analyses. **Result**: Although the present study found that the VST screening test (AUC: 0.62) had a slightly lower diagnostic ability for dementia than the HVLT and SF-EMSE (0.74 and 0.72, respectively), the VST was more sensitive to variables often implicated in dementia risk studies such as age, gender, education status, general health status, self-reported diabetes, physical activity level and self-reported visual problems. **Discussion**: The VST showed comparable scores to established dementia screening tests, but relatively low sensitivity and specificity for diagnosing dementia in this cohort. It is, however, associated with risk factors for dementia and can be used in combination with other screening tests in the diagnostic process.

Poster number	9
Presenter	Sophie Fawcett-Jones
Job title and affiliation	MSc Mental Health Student, University of Nottingham
Names and affiliations of co-authors	University of Nottingham: Sophie Fawcett-Jones, Eithne Heffernan, Emma Broome, Helen Henshaw, Emma Putland and Tom Dening.
Title of talk	Examining representation of hearing loss and its impact on mental health in the UK media.
Abstract	**Introduction** Hearing loss affects 12 million people in the UK, it can have a severe negative impact on individuals, especially their communication, cognition, and quality of life. Commonly reported effects of hearing loss are social isolation and mental health problems (e.g. anxiety and depression). There are a number of interventions for hearing loss, including hearing aids and cochlear implants. However, many individuals delay seeking treatment. This may be due to limited ¬awareness of hearing loss and its consequences amongst the public. In addition, there is a large stigma surrounding hearing loss and having hearing aids. This study will investigate the representations of hearing loss in the UK news media, particularly its impact on mental health, and identify ways to improve these representations. **Methods** Using Nexis (a database of news), we will examine newspaper articles featuring hearing loss during 2022. Multimodal critical discourse analysis will be used, which regards communicative choices (here, images and text) as both reflecting and shaping society, including by contributing to or challenging stigma. Patient and public involvement representatives will be consulted throughout regarding research objectives methods and the data interpretation. **Results** Preliminary results suggest that hearing loss is often described using outdated, inaccurate, negative, and foreboding language. Major topics in the articles included technology/interventions, co-morbidities, and consequences/impacts. **Discussion** The research will inform best practice recommendations for representing hearing loss in the public domain, which could be applied by healthcare organisations, research centres, charities and media outlets to help destigmatise hearing loss.

Poster number	10
Presenter	Laura Williams
Job title and affiliation	PhD Student, (1) Mental Health and Clinical Neurosciences, Institute of Mental Health, School of Medicine, University of Nottingham, (2) National Institute of Health Research MindTech MedTech Co-operative, Mental Health and Clinical Neurosciences, School of Medicine, University of Nottingham
Names and affiliations of co-authors	Dr Aislinn Gómez Bergin; (1) Mental Health and Clinical Neurosciences, Institute of Mental Health, School of Medicine, University of Nottingham, (2) National Institute of Health Research MindTech MedTech Co-operative, Mental Health and Clinical Neurosciences, School of Medicine, University of Nottingham, (3) NIHR Nottingham Biomedical Research Centre, Mental Health and Technology Theme,

	University of Nottingham. Dr Maddie Groom; (1) Mental Health and Clinical Neurosciences, Institute of Mental Health, School of Medicine, University of Nottingham, (2) National Institute of Health Research MindTech MedTech Co-operative, Mental Health and Clinical Neurosciences, School of Medicine, University of Nottingham, (3) NIHR Nottingham Biomedical Research Centre, Mental Health and Technology Theme, University of Nottingham
Title of talk	Engagement with digital mental health and wellbeing interventions from the perspectives of researchers, developers, and users.
Abstract	**Introduction**: Low levels of engagement are often reported in digital mental health intervention (DMHI) research. Despite this, there is no single definition of engagement with DMHI research and there have been calls for the development of a definition. This research seeks to explore engagement from the perspectives of researchers, developers, and users. **Methods**: Mixed methods exploratory, explanatory, and collective case studies of two DMHIs. This enabled a range of data collection techniques to explore users, researchers and developers views of engagement with their specific DMHI, and a scoping review of definitions of engagement within DMHI research. **Findings**: The scoping review showed that 94.6% (n=523) DMHI research publications used the term 'engagement' but did not define the term within the context of their research. Where publications provided a definition (5.42% (n=30)) it typically referred to behavioural measures, and rarely included cognitive or affective engagement. In the case studies, DMHI users considered their engagement with the intervention in terms of behaviour, cognitions, and feelings. Researchers considered behaviour, therapeutic outcomes, and cognitions. **Discussion**: The scoping review findings reflect that engagement definitions are not often present or considered within DMHI research studies. The case study findings highlight the need for the definition to incorporate how DMHI users view their engagement as this is often not limited to behavioural engagement. A clear definition will help to ensure DMHI research is referring to a standardised term in the future, and potentially further enabling interventions to be robustly evaluated and adapted to reflect different types of engagement.

Poster number	11
Presenter	Manisha Jain
Job title and affiliation	PhD Student, Loughborough University
Names and affiliations of co-authors	Ahmet Begde (Loughborough University), Maria Goodwin (Loughborough University), Tom Dening (University of Nottingham), David Maidment (Loughborough University), Linda Barnes (University of Cambridge), Rachael Brooks (University of Cambridge), Carol Brayne (University of Cambridge) and Eef Hogervorst (Loughborough University)
Title of talk	Predictors of Technology Interest and Memory in Older Adults: Results from CFAS-II
Abstract	Over 1.5 million individuals are expected to have dementia in the UK by 2040. With no long-term effective treatments, technologies are promoted to improve memory, a core characteristic of dementia. It is unclear who might be interested and whether having information and communication technology (ICT) is associated with better memory.

	Data were derived from the Cognitive Function and Ageing Study-II (N=541, over 60s) from Newcastle, Nottingham, and Cambridge. 65% of participants expressed interest in technology for memory improvement. Those interested had better global cognition, but not memory performance. Stepwise backward logistic regression demonstrated that women (OR = .66; 95% CI = .45, .98), no ICT access (OR = 2.55; 95% CI = 1.74, 3.75), and frequent loneliness (OR = .36; 95% CI = .16, .83) predicted less interest. Further analyses determined predictors of memory. Logistic regression showed that walking four to five days per week, ICT confidence, being married, and mid-high socioeconomic position predicted higher MMSE scores. Linear regression demonstrated that moderate exercise, walking, ICT confidence, being married, a relatively younger age, higher socioeconomic position and being a women predicted higher immediate and delayed recall. However, subjective memory was predicted by ICT confidence and self-reported health in a logistic regression. Not included in the final models were comorbidities, age, education, technology ownership, loneliness, accommodation, vigorous exercise, and ADL/IADL impairment. This study demonstrates that those at greater risk of dementia express the least interest in technology for memory improvement, but that psychosocial activities (exercise and ICT) may improve memory and cognition.

Poster number	12
Presenter	Clare Burgon
Job title and affiliation	Research Fellow, University of Nottingham / NIHR BRC (hearing)
Names and affiliations of co-authors	Clare Burgon1,2, Eithne Heffernan1,2, Sandra Smith1, Phoebe Beale3, Suman Prinjha4, Sian Calvert1,2, Emma Broome1, Tom Dening5, Jean Straus6, Helen Henshaw1. 1.National Institute for Health and Care Research (NIHR), Nottingham Biomedical Research Centre, Nottingham, UK. 2.Hearing Sciences, Mental Health and Clinical Neurosciences, School of Medicine, University of Nottingham, Nottingham, UK. 3.School of Health Sciences, University of Nottingham, Nottingham, UK 4. Centre for Ethnic Health Research, University of Leicester, Leicester, UK 5. Mental Health and Clinical Neurosciences, School of Medicine, University of Nottingham, Nottingham, UK. 6.Patient Partner
Title of talk	Barriers to the inclusion of underserved groups in research about co-existing dementia and hearing conditions: An experience-based co-design study.
Abstract	**Introduction**: Dementia and hearing conditions commonly co-occur, so research needs to be inclusive of people who experience both. It is also important that research into these conditions includes underserved groups, to address health disparities and support generalisability. This study aimed to identify who is underserved and what barriers they experienced in the context of dementia and hearing research. This represents the first phase of an experienced-based co-design project to develop a toolkit of resources and strategies for engaging underserved groups in dementia and hearing research. **Method**: Focus groups and semi-structured interviews were conducted with researchers and clinicians (N=19 to date) who work with people with dementia, hearing conditions and/or underserved groups. Further interviews will be conducted with patients and carers from underserved groups.

	Results: Underserved groups in dementia and hearing research were identified, including ethnic minority communities, people with learning difficulties, and people living in temporary housing, alone, or rurally. Barriers to their engagement in research included language, digital and health literacy, stigma and (mis)understandings about dementia and hearing conditions. Some barriers were common across research generally, including limited funding, inflexible ethics requirements, and poor communication between researchers. Other barriers were common across different underserved groups, such as mistrust and differing priorities from researchers. **Conclusions**: Some barriers experienced by underserved groups in dementia and hearing research reflect societal and structural problems, however, others can be immediately addressed by researchers. The following phases of this project will develop targeted tools, methods, and recommendations to address these issues.

Poster number	13
Presenter	Phoebe Beale
Job title and affiliation	Student, University of Nottingham
Names and affiliations of co-authors	Binta Jammeh, Veronica Marin Marin, Clare Burgon, Eithne Heffernan (University of Nottingham)
Title of talk	Review of toolkits and frameworks for promoting the inclusion of underserved groups in research about co-existing dementia and hearing loss.
Abstract	**Introduction**: Hearing loss is extremely common amongst people living with dementia and substantially affects their quality of life. Furthermore, it is a key risk factor for developing dementia. This research reviewed available toolkits and frameworks for engaging underserved groups (e.g., ethnic minority communities, the Deaf community) in healthcare research, especially research about dementia and hearing loss. It is vital to engage underserved groups to enable better generalisation of research findings, to ensure that interventions benefit these groups, and to reduce health inequalities. **Methods**: This project was supported by the University of Nottingham Excel in Science programme for widening participation in academia. First, we reviewed the characteristics and content of available toolkits and frameworks for engaging undeserved groups in healthcare research, especially dementia and hearing research. Second, Patient and Public Involvement (PPI) representatives provided recommendations for engaging underserved groups in dementia and hearing research. **Results**: The identified toolkits (e.g., Trial Forge INCLUDE Ethnicity Framework) reported that factors affecting the engagement of underserved groups include funding, researcher training, language barriers, stigma, trust, and suitable data collection tools. Relevant frameworks included intersectionality theory and the candidacy framework. PPI recommendations included building a community of friendship,

	regular communication, adopting an informal and flexible approach, and highlighting the benefits of the research. **Discussion**: This research provides important guidance on improving the inclusivity of dementia and hearing research, which would benefit both researchers and participants. The findings will be implemented in a new James Lind Alliance Priority Setting Partnership for Co-existing Dementia and Hearing Conditions.

Poster number	14
Presenter	Colleen Ewart
Job title and affiliation	PPI Co-Investigator, University of Nottingham
Names and affiliations of co-authors	Colleen Ewart (University of Nottingham), Dr Alexandra Lang (University of Nottingham), Dr Kirsty Sprange (University of Nottingham), Prof Kapil Sayal (Nottinghamshire Healthcare NHS Foundation Trust), STADIA PPI Panel, STADIA Youth Lab, The STADIA consortium
Title of talk	Understanding personal added value of PPI experiences
Abstract	Patient and public involvement (PPI) practices are well established in health and social care research. The experiences of PPI contributions vary widely and to understand this, they are traditionally examined under approaches such as GRIPP2 (Staniszewska et al. 2017) and Realist Evaluation Methodology (Evans et al. 2014). This research looks to investigate the sustained impact and added value of PPI contributors from a personal perspective. Prior research has found that whilst the PPI evidence base has expanded over the past decade, the quality of reporting within papers is often inconsistent, limiting our appreciation of how it works, contextual influencers on practices and what the sustained impact is for the PPI contributors themselves. This study builds on work carried out by a PPI group on a mental health RCT (Day et al. 2020), whereby reflections on their experiences elicited a wide range of anticipated and unanticipated benefits. A thematic analysis of these reflections was carried out and produced an initial framework from which to understand these points of added value (Ewart et al. 2022). The current research has used this initial work in a formative way, to enable the co-creation of a nationwide survey which is designed to elicit data about personal benefit derived from PPI activities. The survey is designed to consider the type of benefit, how it is experienced and the longevity of impact. The outputs of the survey will provide insight and learning into how PPI activities and processes can be designed to optimise the benefit to individual contributors.

Poster number	15
Presenter	Amy Aston

Job title and affiliation	Clinical Psychologist, AMH
Names and affiliations of co-authors	Sharron Smith, Danielle De Boos, Anna Tickle (Universities of Lincoln and Nottingham)
Title of talk	Do clinical psychologists have a role in clients' use of psychotropic medication? A mixed methods investigation exploring current forms of involvement
Abstract	**Objectives** This study aimed to explore whether clinical psychologists in the United Kingdom (UK) have a role with their clients' psychotropic medication by exploring forms of involvement undertaken, and decision-making behind involvement. **Design** A mixed methods design was employed; 147 clinical psychologists took part in an online survey, and 11 respondents were interviewed, selected using intensity sampling. **Methods** Descriptive statistics and thematic analysis were used to analyse the quantitative and qualitative data, respectively. **Results** All respondents reported having some role with their clients' psychotropic medication. A thematic map diagram was created to capture the process of how clinical psychologists choose to become involved. **Conclusions** Consensus was reached in that clinical psychologists do have a role with their clients' psychotropic medication, although this varies by clinician and takes on many forms. In the light of the changing role, professional guidance would help to promote clarity and consistency. **Practitioner points:** Clinical psychologists are regularly engaging in roles in relation to their clients' psychotropic medication use despite little guidance or training. Findings identify a range of specific roles in relation to psychotropic medication that psychologists can take including formulating the impact of psychotropic medication, supplying information to support informed consent and withdrawal, and questioning and challenging use of psychotropic medication with colleagues and prescribers. There is a need for further research and consideration around roles given movements towards prescribing rights for psychologists (by the British Psychological Society) and recent guidance published for psychological therapists on enabling conversations with clients withdrawing from or taking psychiatric drugs (Guy et al., 2019, Guidance for psychological therapists: Enabling conversations with clients taking or withdrawing from prescribed psychiatric drugs, APPG for Prescribed Drug Dependence, London, UK). ***Publication**:* *Aston, A., Smith, S., De Boos, D., & Tickle, A. (2020). Do clinical psychologists have a role in clients' use of psychotropic medication? A mixed methods investigation exploring current forms of involvement. Psychology and Psychotherapy: Theory, Research and Practice, 94(S2), 359–377. Portico. https://doi.org/10.1111/papt.12281*