

PublicHealth@Cambridge Annual  
Showcase:  
Mental Health



14 June 2017  
Buckingham House  
Murray Edwards College  
Cambridge

# Programme

9.00 Registration, poster viewings and coffee

10.00 Session 1: Talks chaired by Dr Fiona Head, NHS  
Cambridgeshire and Peterborough Clinical Commissioning Group

10.00 Welcome by Professor Carol Brayne, Cambridge Institute of  
Public Health

10.05 Professor Peter Jones - Department of Psychiatry  
“Mindfulness and young people’s population health”

10.45 Dr Emma Howarth - CLAHRC  
“Generating evidence to shape the role of schools in delivering the  
public mental health response in the East of England”

11.05 Dr Elizabeth Foyster - Faculty of History  
“Historical perspectives on caring for people with learning difficulties and  
mental illness”

11.25 Dr Juliet Foster - Department of Psychology  
“The contribution of social psychology to research on mental health”

11.45 Dr Tim Dalgleish - MRC Cognition and Brain Sciences Unit  
“Mindcraft: Mindfulness interventions for the prevention of depression”

12.05 Dr Sriya Iyer - Faculty of Economics  
“Religion and Depression in Adolescence”

12.25 Hannah Jongsma- Department of Psychiatry  
“The international epidemiology of psychotic disorders: variance by time,  
place and person”

12.45 Lunch and poster session - see last page for poster titles

14.00 Session 2: Lightning talks chaired by Dr Robbie Duschinsky -  
Department of Public Health and Primary Care

- Olivia Remes - Department of Public Health and Primary Care  
“Area deprivation and generalized anxiety disorder: findings from a large, population study”
- Richard Allen - Public Health England  
“Building a supportive work environment for you and me in 6”
- Anna Dawson - Faculty of Education  
“Mindfulness Interventions within University Student Populations: A Meta-Analysis of Randomised Control Trials”
- Dr Eleanor Winpenny - CEDAR  
“Diet quality and depressed mood in adolescents: a prospective cohort study”
- Dr Sophie Reijman - Primary Care Unit  
“Disorganised attachment: A data mining approach to the Generation R study”

15.00 Tea

15.25 Session 3: chaired by Dr Terry Dickerson - Engineering Design Centre

15.25 Dr Maria Ttofi - Institute of Criminology  
“Long-term effects of school bullying and peer victimization in adult life: Implications for public health and crime prevention initiatives”

15.45 Dr Andres Roman-Urrestarazu - Autism Research Centre  
“Mental health, substance abuse and millennials: Effects of intergenerational inequality and the 2007 recession”

16.10 Professor Carol Brayne - Cambridge Institute of Public Health  
“Population studies to inform our knowledge of mental health in successive generations of older adults”

16.35 Dr Jane Fleming - Cambridge Institute of Public Health  
“Older old people towards the end of life – well-being, preferences and care”

17.00 Close and drinks reception

# Abstracts and biographies for speakers

**Peter Jones - Department of Psychiatry**

## **Mindfulness and young people's population health**

The mental health of young people is a cause for concern when seen through any lens. The most recent ONS Adult Mental Health Survey showed, for the first time in 30 years, an increase in moderate to severe mental illness in young women in the general population.

With 50% of young people going on to higher education after leaving school, universities and further education colleges are facing a rising tide of mental health problems in students.

This presentation focuses on two areas. First, data from two Cambridgeshire samples both indicate that a population-based approach to improving mental health may be preferred to an individual-level policy. Second, and linked to the lightning data presentations, a randomised trial of mindfulness courses in Cambridge University students indicates promising population-level effects consistent with resilience (the Mindful Student Study).

Quite what a possible mental health strategy for young people should include will be discussed.



Peter Jones is Professor of Psychiatry, Director of the NIHR CLAHRC East of England and Deputy Head of the School of Clinical Medicine. He went to medical school in London (KCL and Westminster), studied epidemiology at LSHTM and psychiatry at the Maudsley. After five years as Professor of Psychiatry in Nottingham, Peter moved to Cambridge in 2000. His clinical and research interests are in the causes and evolution of mental

ill health in young people, particularly psychotic disorders, and life course models of health. He established the CAMEO early intervention service, and inhabits the intriguing landscape between the T1 and T2 gaps.

## **Emma Howarth - NIHR CLAHRC East of England**

### **Generating evidence to shape the role of schools in delivering the public mental health response in the East of England**

Schools are increasingly viewed as having a central role in the promotion of children's and young people's emotional wellbeing and the prevention of mental health difficulties. However there remains uncertainty as to what an effective, acceptable and feasible school response looks like.

I will talk about two studies that have been undertaken with the aim of generating regional evidence to guide the school based mental health response in the East of England. The first study identifies consensus between the public and the children's workforce regarding the critical features of an effective school response to prevent poor mental health outcomes. The second builds on the first by considering how primary schools can be supported to effectively identify children who are at risk of, or already experiencing the early signs of mental health difficulties.



Emma Howarth is a Senior Research Associate for the Collaboration for Leadership in Applied Health Research Care in the East of England (EoE CLAHRC), and co-lead of the Child and young people's mental health services research group [www.clahrc-eoe.nihr.ac.uk/research/research-themes/innovation-and-evaluation-of-population-health/camhs-innovation](http://www.clahrc-eoe.nihr.ac.uk/research/research-themes/innovation-and-evaluation-of-population-health/camhs-innovation). Her research focuses on developing and evaluating interventions and services to improve children's mental health outcomes. She has a particular interest in early intervention targeted to 'high risk' groups, with specific expertise regarding children's exposure to hostile, coercive and violent family environments.

## Elizabeth Foyster - Faculty of History

### Historical perspectives on caring for people with learning difficulties and mental illness

This paper will provide a summary of the challenges facing historians who investigate the lives of those affected by learning difficulties and mental illness in the past. It will demonstrate that much historical work on mental health has been limited by its focus on individuals who were medical patients and/or were institutionalised. Instead, many people who experienced learning difficulties or mental illness in eighteenth- and nineteenth-century Britain were cared for at home, and by their families. My recently published book, *The Trials of the King of Hampshire: Madness, Secrecy and Betrayal in Georgian England* (Oneworld, 2016), is a case study of how the family of the 3<sup>rd</sup> earl of Portsmouth (1767-1853) managed his mental problems. Attempts by historians to 'diagnose the dead' have had mixed results. Lord Portsmouth's life story shows how some individuals could resist diagnosis. Those who knew Lord Portsmouth, or read about him during his legal trials for insanity, found it difficult to label him: was he sane, mad, or merely 'weak-minded'?



Dr Elizabeth Foyster is a Fellow and College Lecturer in History at Clare College. She is a social historian of Britain c.1600-1850, and has long been interested in recovering the mental lives of individuals and their families in the past. A lucky find in the archives led to her most recent book, *The Trials of the King of Hampshire: Madness, Secrecy and Betrayal in Georgian England* (Oneworld, 2016). She is currently working on three related projects: a history of speech impediments and their cure in eighteenth-century England; a jointly authored article (with Professor Chris Holligan, School of Education, University of the West of Scotland) on sexual crimes involving people with learning difficulties in Scotland, c.1823-1900; and an investigation into the 'care plans' put into place for the long-term wealthy insane in early nineteenth-century England.

## Juliet Foster - Department of Psychology

### The contribution of social psychology to research on mental health

This brief presentation will focus on the contribution of social psychology to mental health research, considering in particular social psychological work on understandings of mental health problems, and their wider implications. Work that considers understandings held by the general public, by people who use mental health services and by mental health professionals will be examined, and the consequences of 'mismatches' between these explored. In particular, a recent study examining representations of mental health problems held by members of the public centred on 'Otherness' and (non-conscious) ideas of contagion will be discussed. These results will be considered in light of what we know about the successes and failures of mental health campaigns aimed at promoting greater understanding and combating stigma, and in particular how this might relate to the reported greater success of campaigns that focus on social contact over other methods of influence.



Dr Juliet Foster is a Senior Lecturer in Social Psychology in the Department of Psychology and Senior Tutor of Murray Edwards College. Much of her work has focused on the understandings of mental health problems within society. Her first book, *Journeys Through Mental Illness: clients' understandings and experiences of mental distress* (Palgrave, 2007) focused on the understandings of people using mental health services and their implications, while her more recent work focuses more on public understandings and media representations. A specialist in qualitative analysis, she is also a major contributor to the field of social representations theory.

## **Tim Dalgleish - MRC Cognition and Brain Sciences Unit**

Mindfulness-based interventions have great promise for the prevention of mental health problems, especially depression. In this talk I discuss the current state-of-the-art of Mindfulness-Based Cognitive Therapy (MBCT) for people with recurrent depression who are in remission but at risk of future episodes. The effectiveness of MBCT and potential mechanisms of action will be discussed. The second part of the talk will focus on mindfulness as a primary intervention for mental health difficulties in secondary-school age children including our ongoing trial with 80 UK schools.



Tim Dalgleish is a clinical psychologist. He works both as a research scientist for the Medical Research Council and as a practitioner in the NHS. His research focuses on understanding and developing psychological treatments for common mental health problems, such as depression, anxiety, and post-traumatic stress. He adopts a translational approach, seeking to utilise insights from basic cognitive

neuroscience to enhance clinical interventions for these conditions. His work employs a range of scientific methods from brain imaging through to the use of large scale clinical trials.

## Sriya Iyer - Faculty of Economics

### Religion and Depression in Adolescence

Depression is the leading cause of illness and disability in adolescence. Many studies show a correlation between religiosity and mental health, yet the question remains whether the link is causal. One key concern for economists is selection into religiosity. Our research exploits plausibly random variation in adolescents' peers to shift religiosity independently of individual-level unobservable factors that might affect depression, and show conditions under which an individual effect of religiosity is separated from the potential direct effect of peers. Using a nationally representative sample of adolescents in the US, we find robust effects of religiosity on depression that are particularly strong for the most depressed. Our research demonstrates that these effects are not driven by the school social context. Religiosity buffers against stressors, possibly through improved psychological resources and religion-based support structures. This may have implications especially for effective mental health policy.



Sriya Iyer is a Bibby Fellow and College Lecturer at St. Catharine's College, Cambridge and an Affiliated Lecturer in the Faculty of Economics. She serves on the Association for the Study of Religion, Economics and Culture. She has received grants from the Population Council, British Academy, John Templeton Foundation and the Cambridge-INET Institute. Her published research includes a book on *Demography and Religion in India* (Oxford University

Press) and articles in economics and demography journals. Her book on *The Economics of Religion in India* (Harvard University Press) will be published in 2018. She was awarded a Pilkington Prize for Teaching Excellence in 2014.

## Hannah Jongsma - Department of Psychiatry

### **The international epidemiology of psychotic disorders: variance by time, place and person**

The WHO ten-country study published in 1992 was widely (mis)-interpreted to indicate homogeneity of the incidence of psychotic disorders, leading to an active search for the 'schizophrenia gene' over environmental determinants. This dogma has changed substantially, culminating in the publication of a global systematic review and meta-analysis which indicated substantial variance in incidence across populations and geographical locations. Against this background, a multinational gene-environment interaction study (the EU-GEI study) was set up to investigate the epidemiology of psychosis using comparable methodology. Incidence of psychosis was estimated across 17 catchment areas in six countries, and varied eightfold after direct standardisation for age, sex and ethnicity. Incidence was higher in younger age groups, in men and in ethnic minorities. Multilevel Poisson regression indicated that variation between catchment areas was partially attributable to levels of owner-occupied housing, suggesting that markers of socioeconomic security may predict psychosis incidence at the population-level.



Hannah Jongsma is a final-year PhD-student in the Department of Psychiatry at the University of Cambridge, supervised by Professor Peter Jones and Dr James Kirkbride (UCL). Her thesis focusses on the epidemiology of psychosis, using data from the EU-GEI study. Her main interest is the higher risk of psychosis in ethnic minorities, and she is currently investigating the role of social circumstances in causing this.

Before doing her PhD, Hannah completed a Master's in Public Health at King's College London (with distinction), and an MSc in Philosophy and Public Policy at the LSE, and she worked in health policy.

## **Maria Ttofi - Institute of Criminology**

### **Long-term effects of school bullying and peer victimization in adult life: Implications for public health and crime prevention initiatives**

Longitudinal research has established a strong link between school bullying and adverse outcomes later in life. A series of interconnected systematic reviews and meta-analyses have shown that school bullying (perpetration and victimization) uniquely contributes to externalizing (e.g. drug use, offending) and internalizing (e.g. anxiety, depression) problems in adult life. Long-term associations are statistically significant even after taking into account pre-existing adjustment problems and other major childhood risk factors. Results from these meta-analytic reviews will be used to argue that effective bullying prevention programmes can be seen as a public health and crime prevention initiative. Evidence on the effectiveness of anti-bullying programmes will be presented based on results from a thorough systematic/meta-analytic review. The last part of the presentation will touch on current/ongoing research on mental health and crime based on the Cambridge Study in Delinquent Development, a three-generational prospective longitudinal study.



Dr Maria Ttofi is a University Lecturer in Psychological Criminology at the Institute of Criminology, University of Cambridge. The academic work of Dr Ttofi revolves around two main areas, namely: (a) developmental criminology, with a focus on early risk and protective factors research for pathways into and out of crime and (b) experimental criminology, with a focus on systematic reviews, meta-analyses and programme evaluation. She has conducted a series of systematic reviews in the area of school bullying, including a meta-analysis on the effectiveness of anti-bullying programmes and a number of meta-analyses on the long-term adverse outcomes of school bullying.

## Andres Roman-Urrestarazu – Autism Research Centre

### **Mental health, substance abuse and millennials: Effects of intergenerational inequality and the 2007 recession**

We will discuss the evidence of emerging disparities among Millennials and older generational cohorts with respect to illicit substance use using repeated cross-sectional data from the National Survey on Drug Use and Health (NSDUH).

We examined trends in past-month binge alcohol, cocaine, crack, heroin, oxycontin, and methamphetamine use. Logistic regression models were used to examine differences in illicit substance use between Millennials and other generational cohorts while adjusting for sociodemographic, economic, and health covariates.

Prevalence of binge alcohol, cocaine, heroin, and oxycontin was highest among Millennials. Heroin use has increased somewhat from 2007-2014. Binge alcohol, cocaine, and crack use was more likely to be associated with higher educational attainment. Disparities in illicit substance use among generational cohorts are a persistent problem with the burden falling primarily upon Millennials. These disparities in illicit substance use, combined with disparities in wealth, work opportunities, and vulnerability, should inform policymakers' approaches to addressing the complex array of problems facing Millennials.



Dr Andres Roman-Urrestarazu is Assistant Professor at Maastricht University Department of International Health and concurrently holds the Gilling's Fellowship in Global Public Health at the Institute of Public Health (IPH), University of Cambridge and the Institut Louis Pasteur (ILP) Paris. He currently leads a project that studies the

association between austerity, macroeconomic indicators and substance misuse. His clinical work and research is based in the Autism Research Centre, Department of Psychiatry, University of Cambridge where he works on neurodevelopment disorders and more specifically ASD, disability, inequality and social policy.

## **Carol Brayne - Cambridge Institute of Public Health**

### **Population studies to inform our knowledge of mental health in successive generations of older adults**

This presentation will give an overview of the Cognitive Function and Ageing Studies and how a population representative study sustained over many years can provide a platform for a variety of research approaches. These can be used for both understanding the underlying neurobiology, their evolution and risk/protection profiles as well as natural history and changes across time. Challenges are the conceptualisation of mental health and disorders themselves and how to maintain cohorts across decades. The use and value to policy makers as well as researchers will be described.



Carol Brayne is a Professor of Public Health Medicine, Director of the Cambridge Institute of Public Health and Chair of the University of Cambridge's Strategic Research Network. She is a medically qualified epidemiologist and public health academic. Her main research has been longitudinal studies of older people following changes over time with a public health perspective and

focus on the brain. She is lead principal investigator in the Cognitive Function and Ageing Studies and other population based studies and has played a lead role in teaching and training in epidemiology and public health at Cambridge University. She is a Fellow of the Academy of Medical Sciences and a NIHR Senior Investigator.

## **Jane Fleming - Cambridge Institute of Public Health**

### **Older old people towards the end of life – well-being, preferences and care**

One of the world's longest-running studies of ageing - the Cambridge City over-75s Cohort study – followed up over 2000 people since the mid-1980s until the last participant has now died. This rare resource can make an important contribution to our understanding of the mental and physical health of older old people. The study includes over 300 interviews that were conducted less than a year before a participant died aged 85 or older, the largest such representative population-based sample of “the oldest old” approaching the end of life. We have explored transitions in place of residence or care and place of death, including analysis of differences between people with and without dementia. The addition of qualitative research methods to later surveys has enriched the study's quantitative data through interviews with surviving over-95-year-olds and their close relatives and carers. This talk will present key findings on the wellbeing, care needs, experiences and preferences of very old people.



Dr Jane Fleming is a senior researcher at the Cambridge Institute of Public Health with a clinical background in nursing, epidemiology training and extensive health services research experience. Current collaborations include a range of applied research and evaluation projects. Her research interests focus on the needs of the growing numbers of “older old” people and those with dementia: end-of-life care implications; exercise, social and

physical activity contributions to postponing frailty, maximising independence and quality of life; population-based research to inform policy and practice affecting older people; and mixed methods approaches to understanding policy impacts on older people and their carers.

# Abstracts lightning talks

**Olivia Remes- Cambridge Institute of Public Health**

**Area deprivation and generalized anxiety disorder: findings from a large, population study**



Studies have shown that deprivation can increase the risk for mental disorders over and above individual-level circumstances. Whether deprivation is associated with generalised anxiety disorder independent of personal circumstances, and whether this association is different between women and men is unknown.

Women living in the most deprived areas were over 60% more likely to develop anxiety than those living in areas that were not deprived, but this association between deprivation and generalised anxiety disorder was not apparent in men.

The World Health Organisation has emphasised the need to reduce social and health inequalities. Our findings provide a strong evidence base to this call, showing that the environment needs to be taken into account when developing mental health policy; gender is clearly an important factor when it comes to assessing the impacts of the environment, and promoting good mental health.

**Richard Allen-Public Health England**

**Building a supportive work environment for you and me in 6'**



Most who read this will, at some point, experience depression, anxiety or other conditions that might affect their quality of life. Historically the picture has been one of reaching services and receiving support when ill health has become critical – or simply suffering in silence.

There is opportunity to improve the pathway for accessing help - starting with conversations and cultural acceptance that mental ill-health exists and is highly responsive to treatment with real hope of recovery. We are changing how we talk about, understand and respond to mental ill-health.

Support and direction can be provided by Mental Health First Aiders (MHFAs). MHFAs in the work place provide colleagues with alternative routes of support and can signpost professional help. MHFAs provide a helping hand and listening ear - if we experience declining mental health this prompt support can enable quicker and fuller recovery.

**Sophie Reijman- Primary Care Unit**

**Disorganised attachment: A data mining approach to the Generation R study**



Introduced by Main and Solomon in 1990, the infant disorganised attachment classification has fruitfully been used as predictor of mental health in developmental psychology research. It is also widely taken by clinicians as an indicator of inadequate parenting and developmental risk. Although attachment disorganisation comprises a wide range of phenomenologically distinct behaviours, it has been treated as a unitary construct, one that is considered to reflect the child as being alarmed by the parent. In this lightning talk I will discuss our current project in which we

use a data mining approach to the dataset of a prospective cohort study, Generation R, in which pregnancy and parent factors, attachment, and children's neurological, cognitive and behavioural development have been measured up until 9 years of age, and will highlight the relevance of disorganised attachment to public health.

**Anna Dawson- Department of Education**

**Mindfulness Interventions within University Student Populations: A Meta-Analysis of Randomised Control Trials**



The transition to university exposes young adults to novel stressors. Students are expressing an increased need for support. Mindfulness-based interventions (MBIs) are being integrated into university health programs globally with the expectation of reducing distress. Trials have found promising effects of MBIs within university populations, however no comprehensive systematic reviews have been performed. I will present preliminary findings of a meta-analysis of randomised control trials (RCT) which is part of a systematic review. I examined MBI

effects on mental and physical health outcomes, health services usage, and academic performance in university students following a prospective protocol. Twenty-nine studies were included in the meta-analyses. They show that MBIs significantly reduce distress, stress, depression, and anxiety, and increase, mindfulness, subjective wellbeing and self-compassion against passive controls. No significant differences were found between MBIs and active controls but some results are borderline. Most RCTs were small and exploratory.

**Eleanor Winpenny- CEDAR**

**Diet quality and depressed mood in adolescents: a prospective cohort study**



**Background**

Adolescence is a critical period for development of mental disorders, and better understanding of behavioural risk factors is required to develop appropriate preventative strategies. Here we explore cross-sectional and prospective associations between diet and depressed mood during adolescence.

**Methods**

Participants (n=603) with diet data at age 14 and a measure of depressed mood at ages 14 and 17 were included. Models regressed depressed mood at age 14 or age 17 on (a) Mediterranean Diet Score, (b) fruit and vegetable intake and (c) fish intake at age 14.

**Results**

A negative cross-sectional association seen between fruit and vegetable intake and depressed mood was attenuated following adjustment for behavioural covariates or total energy intake. No prospective associations were found between diet measures and later depressed mood.

**Discussion**

Attenuation of cross-sectional associations following adjustment for covariates suggests that previously reported associations in this age range may in part be due to confounding.

# Posters

**Gemma-Claire Ali - Department of Public Health and Primary Care**

How can we facilitate mutual support for mental wellbeing between people living with chronic physical conditions and their supporters?

**Dr Stefanie Buckner - Cambridge Institute of Public Health**

National Evaluation of Dementia Friendly Communities in England (the DemCom Study)

**Dr Stefanie Buckner - Cambridge Institute of Public Health**

Pilot-testing the Age-Friendly Cities evaluation tool

**Dr Isabel Clare - NIHR CLAHRC East of England**

Responding to the Transforming Care agenda: developing community services for adults with learning (intellectual) disabilities

**Dr Joyce Coker - Cambridge Institute of Public Health**

Frailty Trajectories: Understanding Tipping Points Across Care Settings

**Dr Sian Evans - Public Health England**

Evaluation of public health interventions: addressing the barriers and boosting capacity

**Rosanna Fennessy - Faculty of Education**

Young people's perspectives on their long term health condition: The role of network support for school connectedness and psychological wellbeing

**Dr Louise Lafortune - Cambridge Institute of Public Health**

Changing risk behaviours and promoting cognitive health in older adults

**Lauren Milden - Cambridge Institute of Public Health**

Public Health: Research into Policy

**Dr Marcus Redley – Department of Psychiatry**

Healthcare Use, Ill-Health and Mortality in Adults with Intellectual Disabilities and Mealtime Support Needs

**Dr Tennie Videler - Public Health@Cambridge Network**

Funding Opportunities

**Dr Caroline Wright - Public Health England**

Factors influencing variation in participation in the National Diabetes Audit and the impact on Quality and Outcomes Framework indicators of diabetes care management



## Cambridge Institute of Public Health

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