There is a large body of evidence showing that living in a deprived neighbourhood is associated with poor health and life chances and there is an expectation that improvement to housing and neighbourhood conditions will improve health, however there is a lack of robust evidence to inform what matters most. In 2005, and in collaboration with colleagues in the Department of Urban Studies at the University of Glasgow and the Glasgow Centre for Population Health, researchers in the Unit designed and implemented a multi-method evaluation (GoWell) to assess the effects of regeneration of a £1.2 billion programme of housing (70,000 homes) and area regeneration (15 neighbourhoods) across Glasgow at the individual, community and city-wide level including the development of an economic evaluation of this complex intervention. This longitudinal study is the largest of its kind in the world in examining how national policy goals related to communities, regeneration and health are achieved at the local level.

GoWell’s objectives include:
- To investigate how regeneration and housing investment affect individual and household health and wellbeing.
- To understand the processes that support cohesive, sustainable communities.
- To monitor the effects of interventions on area-based inequalities within the city.
- To develop and test research methods.
- To understand the processes of change and implementation which contribute to positive and negative health impacts.
- To contribute to community awareness and understanding of health issues and enable community members to take part in the programme.
- To share best practice and knowledge of ‘what works’ with regeneration practitioners.

The Leith EYC Pioneer Site started in March 2014. Rather than the usual approach of sending out a leaflet to all patients, or providing all staff training, we focused on the experience of one midwife signing a pregnant woman up for the vouchers. This midwife identified and removed key obstacles: some women were only signed up following ultrasound to prove pregnancy (not necessary), and the midwife was able to sign the application form at the booking visit, before the woman had completed her section of the form. A parent support worker helped families to call the centralised help line once the baby was born (otherwise the vouchers stop coming for weeks or months) and shared this information with local midwives.

Midwives followed up women at the 16 week antenatal visit and identified that half were struggling to complete their part of the application form, so we linked in literacy and parent support workers. The approach was shared with neighbouring teams. We are now seeing the impact of the work on midwife teams across Lothian, and are extending the work to health visitors and community settings (e.g. nurseries, early years centres).

So far this work has supported an additional 20 pregnant women in Leith and 35 families in south Edinburgh to access vouchers. We can identify changes that led to these improvements and share successes with these and other teams. Work that started with a single midwife in March 2014 had been shared with colleagues across the country and at three national meetings by the start of June 2014. The speed of improvement, and genuine interest was exhilarating.

This work has demonstrated the value of connecting with front line workers, testing ideas at a human scale, and challenging long held assumptions about a process that we thought we understood. It is having a practical and measurable impact on families on low income. It is not, however, directly addressing the causes of poverty, beyond adult literacy. That is a task that we will have to address in parallel.

Graham Mackenzie
Consultant in Public Health, NHS Lothian
Graham.MacKenzie@nhslothian.scot.nhs.uk

Showcase continued: GoWell
Although focused on regeneration in Glasgow, the aim is to produce findings that are transferable to other regeneration settings. For example, many communities across Scotland, the UK and Europe share a number of characteristics with the GoWell communities and are looking for ways to become healthier, sustainable and more cohesive. In 2015, we will conduct the fourth sweep of our GoWell household survey. This will provide data on a cross section of residents (n=c.4000) in the study areas (n=16) and data from the longitudinal sample (n=c.1100 over 4 sweeps, covering over 9 years of major change to homes and neighbourhoods). We will also investigate the cost-effectiveness of the GoWell initiatives in relation to residents’ health and life chances.

Recent publications
We conducted a study of the impact of welfare reform looking at the changing incidence of financial difficulties among key at-risk groups, and their associations with mental health, from the pre- to the mid-recession period. Difficulties in affording everyday essential items such as food and heating were associated with declining mental health. – Curl, A, Kearns, A. ‘Financial Difficulty and Mental Wellbeing in an Age of Austerity: The Experience in Deprived Communities’, Social Policy and Society 2014 DOI:10.1017/S1474746414000475.

We examined loneliness among people living in deprived communities, where there may be additional barriers to social engagement including low incomes, fear of crime, poor services and transient populations. Feelings of loneliness were most strongly associated with poor mental health, but were also associated with long-term problems of stress, anxiety and depression, and with low mental well-being, though to a lesser degree. The findings also show that neighbourly behaviours of different kinds are important for protecting against loneliness in deprived communities. Familiarity within the neighbourhood, as active acquaintance rather than merely recognition, is also important. – Kearns A, Whitley E, Tannahill C and Ellaway A. ‘Loneliness, social relations and health and well-being in deprived communities’, Psychology, Health and Medicine 2014, DOI:10.1080/13548506.2014.940354

Using data from the longitudinal sample of the GoWell study, it was found that housing improvement works (such as repairs to the outside of the dwelling which improve insulation and visual appearance) were associated with improved health but the effect of gaining employment was stronger highlighting the importance of economic initiatives alongside property-led regeneration. – Curl A, Kearns A, Mason P, Egan M, Tannahill C, Ellaway A. ‘Physical and mental health outcomes following housing improvements: evidence from the GoWell study’, Epidemiology & Community Health 2014 DOI:10.1136/jech-2014-204064

For more information on the GoWell project, contact:
Professor Anne Ellaway, MRC/CSO Social & Public Health Sciences Unit. anne.ellaway@glasgow.ac.uk
Professor Ade Kearns, Dept. Urban Studies, University of Glasgow. ade.kearns@glasgow.ac.uk
Professor Carol Tannahill, Glasgow Centre for Population Health.

This longitudinal study is the largest of its kind in the world in examining how national policy goals related to communities, regeneration and health are achieved at the local level.
Oxford Conference Report

Thank you to the 142 people who completed our questionnaire online, a response rate of 54%. 86% were from university and higher education settings. Overwhelmingly, respondents were epidemiologists or in public health however, most had second and third disciplines, showing a diversification of working situations. Overall For one third of respondents, this was their first ASM. Nearly one-third were not members so we seem to be drawing in new people. Half the first-timers (25/51) were not members.

SSM attendee disciplines

Conference Content
The conference content was generally welcomed and only one disagreed that the standard was good and one that question time was useful. The provision to move between talks is well used, with nearly half the respondents saying that they moved between sessions frequently in order to hear the presentations of choice.

“Thoroughly enjoyable and worthwhile scientifically.”

At the conference reception, Ashmolean Museum, Oxford
In relation to the Cochrane and Pemberton lectures this year, panel sessions were generally welcomed but some thought the second session worked better because in the first the panellists were not given enough scope to comment. Several rated the panel a little lower than the lecture, the mean score for both panels being 3.7 out of 5. A substantial minority neither agreed nor disagreed with the statements given, especially regarding diversity of views and useful contribution. While only 5% disagreed that the panel discussion was appropriate for the Cochrane topic, 13% disagreed that panel members represented a diversity of views and 23% disagreed that each panel member made a useful contribution. For the Pemberton panel, no one disagreed that the panel discussion was appropriate, 15% disagreed that there was a diversity of views and 9% that each panel member made a useful discussion.

So it seems that panels should be included but the choice of panellists and the way they are managed given careful thought. One person suggested that the panellists see the lecture notes in advance and be asked to give a two minute critique.

The perennial problem of poster placement
By far the most common complaint concerned the poster room, which 59% said was not well laid out, at least 60 going on to make a comment about this. In addition, 20% did not think that there was enough time for poster viewing. As one respondent noted, people are busy networking and so poster viewing often loses out. The posters were near the refreshment area, which was a plus, but the serried ranks left little room for people to view them, especially if a poster presenter was engaged in conversation with a delegate. This interaction is generally to be encouraged. There were two suggestions to try verbal presentations of the posters which was tried in Newcastle in 2010. There were a few pleas for healthier less sugar-laden food and also for tea/coffee to be available when people arrive at the conference.

The environment and SSM
On the environmental policy, only 4 people disagreed that having a policy is important and everyone found it convenient to have venues close to each other. The idea of electronic programs was more controversial – 61% did NOT want abstracts only in electronic form and 76% felt the same about the programme. Twenty percent ticked strongly disagree, whereas this option was usually avoided. Suggestions included shortening the conference booklet and trying a user-friendly mobile version of the timetable. Other ideas for decreasing the environmental footprint were to avoid disposable cups etc. – why not an SSM mug we could reuse, maximise recycling, avoid flyers and conference bags, have less meat, and encourage people to get to Dublin other than by air.

ECR pre-conference workshop
There was an ECR workshop the day before the conference, which 31 of our respondents had attended. This was generally thought to be participative, relevant, about the right duration and interesting. However, the morning session of short presentations received some criticism with responses including that it was too rushed to allow sufficient participation, not really advising on career pathways, and too long without a break. One person recommended advertising the ECR workshops on the national Yahoo group for public health trainees. While the ECRs are well catered for, someone noted that there could be better provision for people in mid-career.

Other suggestions
A few complained about the cost of conference – for those having to fund themselves this can be a particular deterrent. And a final small suggestion – to put names on front and back of labels as “about 50% of the participants seemed to be called ‘Annual Conference Dinner’”!

Congratulations to Ben and the Oxford team
Of the 44 free-for-all comments at the end of the survey, 33 were congratulating Ben and his team. Words like “excellent”, “enjoyable”, “fantastically sociable” “worthwhile” were typed in enthusiastically. Most negative comments and specific suggestions have been picked up in previous sections of this report, which will be scrutinised by the SSM committee in January.
ECR’s Corner

Career development in public health research: ECR pre-conference meeting

The ECR contingent kicked off conference festivities a day early in Oxford this year, with a pre-conference meeting entitled ‘Career development in public health research’. The SSM ECR sub-committee had teamed up with the International Epidemiology Association to host this one-off meeting which saw over 60 delegates attend.

The day included plenary talks from several eminent researchers. Professor Jane Armitage gave a talk on statin use and Professor Doug Altman explored the question “How much confidence can you have in published research?” There were also special sessions about fellowships (Hannah Whiteman and Dawn Biram) and non-academic careers (Julie George, Hannah Whiteman and Dr Claire De-May) which sparked lots of discussion and questions from the interested ECR audience. The day finished with a talk about Rosalind Franklin’s career by Professor Valerie Beral, Director of the Cancer Epidemiology Unit in Oxford.

The event was very well received; thank you to those of you who have provided feedback via the conference evaluations. We hope to make the ECR pre-conference meeting an annual event so please get in touch if you have any suggestions or ideas for what to include next time.

One-day events

The ECR section is keen to expand the number of one-day meetings that it organises. We’re very interested in hearing what events you would like to see in the future. If you have a specific topic in mind and/or would be interested in hosting a meeting at your institution then please contact Steven (steven.bell@ucl.ac.uk) to discuss things further.

SSM conference round-up

There was a huge ECR presence at the ASM this year with 54 ECR delegates in attendance, of which 22 had been awarded a free place. We got things rolling early with an ECR ‘speed-meeting’ on Wednesday lunchtime. This gave ECR delegates the opportunity to meet other ECRs before the conference began. Around 30 people attended and everybody had the chance to meet at least half of the group in brief 2 minute stints.

The ECR ‘speed dating’ event was a wonderful forum to make new connections with new friends. Fostering good relationships between the students and ECRs at this stage, as they are just setting out on their careers, can only pay dividends for the future of a society like SSM.- Sarah-Jo Sinnott
SSM conference round-up continued

The first afternoon of the conference provided much food for thought with Prof Gerard Hastings’ inspiring talk encouraging us to “Resist Much, Obey Little” with regards to corporate powers and their marketing strategies. We then had the opportunity to listen to some parallel session talks before the Conference Reception at the fantastic Ashmolean Museum. Later that evening the ECR sub-committee had organised a private space at The Kings Arms pub in Oxford for any ECRs wishing to get-together for some dinner after the Welcome Reception. Around 40 ECRs attended and chowed down on traditional pub fare while discussing the days events.

Over the next couple of days, many ECRs got to present their work in a talk or poster, as well as attend workshops and activities on the Thursday afternoon. The punting activity was especially popular, and luckily everyone managed to reach dry land (and the SSM AGM) without a dip in the water.

SSM wants to chat.

Want to discuss with fellow SSM members topics related to “advancing knowledge for public health” and other member-nominated topics? Starting on the 5th of February 2-3pm GBT, and every first Thursday of the month, type in #SSMchat and tweet-along!

The first topic will be “Favourite Research Paper of All Time”. Can you express you favourite paper in a tweet?
What are the Free place reports?

Free place reports come from the feedback that free place holders give to the SSM committee after participating in the SSM conference (without charge).

The SSM offers these places to potential conference participants who are on a low income, are a current student, or (quite often) both.

Technically, you don't have to be an early career researcher. The important thing is that you are interested in getting involved with the SSM, presenting your research, or you wish to attend the conference to mull over the ideas, theories and methods on offer.

As a thank you, the SSM ask that participants who have attended via the FPR to tell us what they thought.

Some of the editor’s picks are found on pages 14—16.

Extracts from ECR Free Place Reports

I thoroughly enjoyed attending the SSM Annual Scientific Conference in Oxford and felt honored to have been awarded a free place. The high representation of early career researchers at the conference and the networking events aimed specifically at early career researchers helped to increase my confidence in meeting new people and talking about my research at conferences, a task that can often seem intimidating for early career researchers. Opportunities to network were also enhanced through the organised social activities, including the planned activities on Thursday afternoon where I had the opportunity to try punting.

I was given the opportunity to present a poster on a secondary analysis of the Welsh National Exercise Referral trial and I was really impressed with the level of engagement with the posters, with many of the delegates taking the time to ask useful questions and engage in discussion. I also attended the public engagement workshop, where innovative methods of presenting complicated scientific ideas to the general public were demonstrated and discussed. I especially enjoyed seeing a game designed to teach children about the epidemiology of lung cancer using plastic figures and UV pens. This has inspired me to think of innovative ways to communicate my research to the general public.

“I was able to discuss ideas regarding my PhD in school health improvement with both early career and leading researchers in the same field.”

This was the first time that I attended the SSM Annual Scientific Conference. I look forward to attending this conference again in the future and I will certainly be recommending it to fellow students and colleagues. Thank you very much for the free place.

Hannah Littlecott

At the time of applying for a free place to attend this year’s ASM, I was unsure about whether I would have a job at the time of the conference and even whether I should stay within academia. When I was notified that my application was successful, I was still facing this uncertainty and the prospect of attending the conference as unemployed was rather daunting, especially when the first things people usually ask are where are you based and what do you work on? Thankfully, in the weeks prior to the conference I was fortunate to find a postdoctoral position and look forward to starting next week. I am grateful to SSM for supporting those at my career stage and recognising the issues that early career researchers (ECRs) face; a key theme that ran throughout the main conference as well as the pre-conference symposium...

At the conference the stand-out plenaries for me were delivered by Prof. Gerard Hastings, who challenged us to think more about corporate power as a public health priority and Professor Diana Kuh who provided us with an overview of the history and challenges of life course epidemiology. Overall, the conference was well organised and provided a good balance of interesting talks and social activities. Thanks again to SSM for investing in its ECRs and for another great ASM.

Claire Niedzwiedz