



Public Health  
Agency

# Public Health Annual Scientific Conference: Making Life Better – Improving Health and Care for Adults

Wednesday 10 June 2015

Riddel Hall, Stranmillis



## Conference purpose

The Public Health Agency (PHA) and partner organisations are hosting a scientific conference focusing on making life better by improving health and care for the adult population in Northern Ireland.

This joint event aims to raise the profile of public health research, interventions and innovation, and engage local professionals, practitioners and researchers working in the broad field of public health.

The day will also see the launch of the Director of Public Health's sixth *Annual Report* and will provide an excellent opportunity to network across sectors and disciplines. In addition to the keynote plenary sessions, delegates will have the opportunity to participate in a number of parallel sessions showcasing local public health programmes and research.

## Target audience

Practitioners and researchers in Northern Ireland working in the broad field of Public Health.

## Twitter

Follow updates on Twitter at: @publichealthni

The hashtag for the conference is **#health4adults**

## Programme

**8.45am** Registration and refreshments

**Morning session Chair: Dr Eddie Rooney, Chief Executive, PHA**

**9.30am** **Welcome and DPH Report**  
Dr Carolyn Harper, Medical Director/Director of Public Health, PHA

**10.00am** **People not pathogens**  
Dr Alistair Story, Clinical Lead, Find&Treat Service,  
University College London Hospitals

**10.40am** **Tea and coffee**

**11.10am** **Parallel sessions**

Community  
engagement/  
empowerment

Physical  
activity

Mental  
health and  
wellbeing

Evaluating  
what we  
do

Building  
the evidence  
base

**12.30pm** **Community empowerment – a pathway to greater health equity**  
Prof Jennie Popay, Professor of Sociology and Public Health,  
Lancaster University

**13.10pm** **Lunch**

**Afternoon session Chair: Ms Úna McKernan, Deputy Chief Executive, NICVA**

**2.10pm** **Smoking cessation**  
Prof John Britton, Professor of Epidemiology,  
Nottingham City Hospital

**2.50pm** **Parallel sessions**

Screening  
and early  
detection

Behaviour:  
drugs and  
alcohol

Creating  
the  
conditions

Behaviour:  
nutrition  
and obesity

Building the  
evidence  
base

**4.00pm** **Panel discussion**

**4.30pm** **Close**



### **Dr Eddie Rooney**

Dr Eddie Rooney is Chief Executive of the PHA. The PHA was established in 2009 to protect and improve health and social wellbeing and reduce health inequalities. Prior to joining the PHA, Dr Rooney served as Equality Director at the Office of the First Minister and Deputy First Minister, and as Deputy Secretary at the Department of Education from 2004–08.



### **Dr Carolyn Harper**

Dr Carolyn Harper graduated in medicine at Queen's University Belfast and, after completing her training in general practice, moved into public health. She worked previously at the Northern Health and Social Services Board as a Consultant in Public Health with main responsibilities for acute service commissioning and clinical and social care governance.

She also worked in California as Director of Quality Improvement for the state quality improvement organisation. Most recently, she was Deputy Chief Medical Officer for Safety, Quality and Standards, and from 1 April 2009 has been Director of Public Health for Northern Ireland, with the PHA. She is a firm believer in partnership working and is passionate about improving health and reducing inequalities.



### **Dr Alistair Story**

Dr Alistair Story is founder and Clinical Lead of the pan-London Find&Treat Service based out of University College London Hospitals. His core expertise is in tackling communicable diseases among homeless people, drug and alcohol users, prisoners and destitute migrants.

His research interests include outreach, integrating point of care diagnostics on the street, case management, the inclusion of service users within multi-disciplinary teams (MDTs), and the use of mobile internet technologies to promote engagement with health services and treatment continuity. He is an original member of the Faculty for Homeless and Inclusion Health and the Pathway Team, and lecturer with the Department of Infection and Population Health at University College London.



### **Professor John Britton**

Prof John Britton teaches in the areas of epidemiology, public health and tobacco policy. His main area of research is smoking prevention and other avoidable causes of chronic respiratory disease.

John is an honorary consultant in respiratory medicine at Nottingham University Hospitals and a professor of epidemiology at the University of Nottingham. He received a CBE in 2013 for his work in respiratory medicine and his research into tobacco control.

Prof Britton is also the Director of the UK Centre for Tobacco Control Studies (UKCTCS), which is a network of tobacco research groups from nine universities led from the University of Nottingham.



## **Professor Jennie Popay**

Jennie Popay is Professor of Sociology and Public Health at Lancaster University, Deputy Director of the National Institute for Health Research (NIHR) School for Public Health Research (SPHR) in England, and Director of Engagement for the NIHR Collaboration for Leadership in Applied Health Research and Care (CLAHRC) for the NW Coast. She is also co-director of the Liverpool and Lancaster Collaboration for Public Health Research (LiLaC), one of eight academic members of the SPHR.

Jennie has worked as a teacher, policymaker and researcher in academia and in the public and voluntary sectors in the UK, Africa and New Zealand. Her research interests include the social determinants of health and health equity, the evaluation of complex 'natural' policy experiments, community empowerment, and the sociology of knowledge. She has been involved in a wide range of mixed methods studies but has particular expertise in qualitative methods.

Her current research includes an evaluation of a large-scale community empowerment initiative in England and leadership of a programme of work developing and evaluating local authority approaches to addressing health inequalities. She has recently completed an evaluation of the impact on health inequalities and their social determinants of the English New Deal for Communities regeneration programmes and their approaches to community engagement. She also led a collaboration funded by the Medical Research Council in the UK producing online guidance on how to assess the impact of public involvement in research ([www.piiarf.org.uk](http://www.piiarf.org.uk)).

She ran the global Social Exclusion Knowledge Network supporting the World Health Organization Commission on the Social Determinants of Health and has held public appointments with the Commission on Health Improvement, the Commission on Patient and Public Involvement in Health, the Bevan Commission in Wales, and was the inaugural chair of the English charity The People's Health Trust.



## **Ms Úna McKernan**

Úna McKernan has been Deputy Chief Executive of the Northern Ireland Council for Voluntary Action (NICVA) since May 2010, having previously worked as Director of Corporate Services for NICVA since April 2002. Prior to this, Úna was HR Manager with NICVA for over seven years.

Úna leads on sourcing funding for NICVA to deliver support and capacity building programmes for the Northern Ireland voluntary and community sectors, and manages all contractual and funding relationships on behalf of the organisation.

Úna has represented NICVA and the voluntary and community sectors on a range of committees and working groups, including the NI Social Care Council, Health and Social Care Board, Cross Sector Advisory Forum, NI Interchange Group, Employers for Childcare, and CPD Business and Industry Forum. More recently, she has been a member of the Bureaucracy Project Team lead by the Department for Social Development.

A graduate of the University of Ulster, Úna has also undertaken a number of work-related development programmes including the Leaders Programme at Harvard University and the Development Programme at Boston College. Úna has gained a Diploma in Company Direction with the Institute of Directors.

## Parallel sessions

The parallel sessions will highlight local public health innovations, research and evidence-based practice.

Delegates will have registered for parallel sessions, 4 presentations in the morning and 3 presentations in the afternoon. Each presentation will last 15 minutes (10 minutes for the presentation and 5 minutes question time for each presenter). Also time is allocated for movement between sessions.

## Morning parallel sessions

### Community engagement/empowerment

**Chair: Professor Frank Kee, Centre of Excellence, Queen's University Belfast**

#### 1. Hidden social networks in behaviour change interventions

*We choose our friends, neighbours and colleagues, we inherit our relatives, and each of the people we are connected with also does the same, therefore assembling ourselves into social networks.*

*Evidence demonstrates that our embeddedness in these social networks affects our health.*

(Dr Ruth Hunter, Centre of Excellence for Public Health, Queen's University Belfast)

#### 2. A holistic approach to tackling cold homes by Local Government

*For six years, Local Government in the Northern area has received funding from the PHA to increase the number of self-referrals from members of the public into a variety of energy efficiency schemes.*

(Ms Alison Briggs, Antrim and Newtownabbey Borough Council)

#### 3. My Guide: supporting the health, wellbeing and social inclusion of people who are blind and partially sighted

*Guide Dogs' My Guide service supports healthy living and builds links between the local community and those living with sight loss.*

(Miss Arlene Verner, Guide Dogs Northern Ireland)

#### 4. Making life better: improving health and care for individuals living with rare diseases

*Rare diseases affect more than 5% of the population in Northern Ireland, with many affected adults living with more than one condition. Two collaborative surveys were carried out in 2014 on patients with rare diseases to explore 'Living every day with a rare disease'.*

(Dr Amy Jayne McKnight, Centre for Public Health, Queen's University Belfast)

### Physical activity

**Chair: Mrs Mary Black, PHA**

#### 1. Empowering healthy living by promoting sport participation

*This study sought to identify correlations between sport participation in the general population and those with a long-standing illness/disability, allowing GPs to better target their health advice and maximise their impact on empowering patients to live healthy lives.*

(Dr Neil Heron, Centre for Public Health, Queen's University Belfast)

## **2. Fit 4 U Active Lifestyles programme**

*The Fit 4 U Active Lifestyles programme seeks to empower people with physical/sensory disabilities to improve their health through participation in a range of physical activity and leisure opportunities, which promote independence and citizenship.*

(Mrs Mairead Casey and Mrs Jillian Cosgrove, Southern Health and Social Care Trust)

## **3. Western Green Gym – empowering local people to make healthier lifestyle choices**

*The PHA-funded Western Green Gym is a programme of community support that engages primarily adults in environmental activities such as food growing on allotments and management of natural habitats in the wider countryside alongside healthy eating, fitness education and awareness-raising activities.*

(Ms Dianne Keys, The Conservation Volunteers)

## **4. ‘Oh sit down’: a qualitative exploration of factors that promote sedentary behaviour and physical activity at work**

*This study aimed to explore desk-based office workers’ perceptions of factors that limited or encouraged sedentary behaviour and physical activity at work, including the use of a novel mobile phone application.*

(Dr Mark Tully, Centre for Public Health, Queen’s University Belfast)

## **Mental health and wellbeing**

### **Chair: Dr Denise O’Hagan, PHA**

#### **1. Exploring young adult service user perspectives on mental health recovery**

*Young adult service user perspectives on mental health recovery have been explored as part of a wider research study. This analysis relates to the final phase of the study involving semi-structured interviews with service users.*

(Miss Claire McCauley, PhD Research Student, Ulster University)

#### **2. Exposure to trauma and associations with suicidal behaviour and death by suicide in Northern Ireland**

*Using contemporary theories of suicide as a framework, this study analyses the recent evidence from the Northern Ireland Study of Health and Stress and the database of deaths by suicide in Northern Ireland to evaluate the associations between suicidal behaviour and traumatic events.*

(Professor Siobhan O’Neill, Ulster University)

#### **3. Working towards mental wellbeing for everyone**

*Together For You is a partnership project backed by the Big Lottery Fund, aimed at delivering mental health and wellbeing services to a range of people across Northern Ireland.*

(Miss Amanda Jones, Together For You, Action Mental Health)

#### **4. The burden of living with and caring for a suicidal family member**

*Although much has been written about suicide prevention, less is known about the experience of carers and family members and the impact the suicidal behaviour of a family member has on them.*

(Mr Iain McGowan and Professor George Kernohan, Ulster University)

## Evaluating what we do

**Chair: Ms Adele Graham, PHA**

### **1. A service evaluation of positive living programmes in day centres in the Northern Health and Social Care Trust**

*This study examined outcomes in day-care settings, in particular whether participation in a Positive Living Programme – an evidence-based programme designed to help improve mental wellbeing – had a measurable positive outcome.*

(Mrs Debbie Gillespie, Northern Health and Social Care Trust)

### **2. Mellow Parenting**

*Mellow Parenting is an evidence-based programme developed in Scotland to help vulnerable parents and children forge good relationships. It is based on attachment theory.*

(Mrs Deirdre McParland, Southern Health and Social Care Trust)

### **3. Social return on investment: evaluation of the Healthwise Physical Activity Referral Programme**

*The Healthwise Physical Activity Referral Programme is an Active Belfast initiative tailored to change the behaviour of adults who are inactive.*

(Mr Sean McQuade, Belfast Health Development Unit)

### **4. Moving on – Post Rehabilitation Enablement Programme for stroke survivors**

*Exploring the feasibility and potential benefits of delivering a Post Rehabilitation Enablement Programme (PREP) to stroke survivors in the local community, designed to facilitate the rehabilitation journey through exercise and education within three months of discharge from statutory rehabilitation services.*

(Dr Frances Campbell, Northern Ireland Chest Heart and Stroke)

## Building the evidence base

**Chair: Dr Nicola Armstrong, PHA**

### **1. The profile of homeless people presenting to Emergency Departments according to the Northern Ireland Registry of Self-Harm, 2012–2014**

*Taking into account the historically high level of homelessness and elevated rates of self-harm in Northern Ireland, this is the first study to investigate the profile of homeless people who present to hospital with self-harm.*

(Ms Caroline Daly, Northern Ireland Registry of Self-Harm, PHA / National Suicide Research Foundation)

### **2. Unintentional injuries in adults of working age: who's injured is no accident**

*The Health Intelligence Unit of the PHA has brought together data on unintentional injury mortality, hospital admissions, ambulance call-outs and Emergency Department attendances. This is the first time that such a breadth of injury information for Northern Ireland has been collated and analysed.*

(Dr Andrew Gamble, PHA)



### **3. Stop smoking services: an effective tool for making life better**

*As part of a strategic approach to tobacco control, the PHA commissions stop smoking services, which have been developed in line with National Institute for Health and Care Excellence (NICE) guidance to meet specific quality standards.*

(Mrs Gerry Bleakney, PHA)

### **4. What record linkage can tell us about the health of the public**

*This project outlines recent, current and prospective Northern Ireland research activity that uses linked administrative data to provide a greater understanding of the health of the population.*

(Dr Dermot O'Reilly, Centre of Excellence for Public Health, Queen's University Belfast)

## **Afternoon parallel sessions**

### **Screening and early detection**

**Chair: Mrs Dolores McCormick, Royal College of Nursing**

#### **1. Farm family health check programme**

*Farmers working long and antisocial hours face greater isolation, exacerbated by the rural setting, as their presence is often less visible in these communities. The Department of Agriculture and Regional Development (DARD) and the PHA have joined forces to deliver a unique and innovative project to tackle the health needs and social isolation of farmers and their families.*

(Mrs Diane McIntyre, PHA, and Mrs Doreen Bolton, Northern Health and Social Care Trust)

#### **2. Barriers and motivators to participation in the Northern Ireland breast and cervical screening programmes: a qualitative study**

*Across Northern Ireland, 75% of eligible women participate in the breast screening programme and 77% in the cervical screening programme, which is on a par with other UK regions. This study explores how women from areas of lower uptake decide whether or not to participate in screening.*

(Dr Diane Anderson, PHA)

#### **3. Cancer screening programmes – public knowledge and beliefs in Northern Ireland**

*In 2014, the PHA began developing a campaign on cancer awareness in Northern Ireland. Part of the research undertaken to inform the direction of the campaign was a public survey on knowledge and beliefs about cancer, including the three Northern Ireland cancer screening programmes.*

(Dr Diane Anderson, PHA)

## Behaviour: Drugs and alcohol

**Chair: Mrs Siobhan O'Brien, PHA**

### **1. Tackling the burden of alcohol – The Belfast Trust Alcohol Care Team experience**

*Alcohol misuse is a major public health issue. Alcohol-related morbidity costs Health and Social Care in Northern Ireland an estimated £250m per year. An effective alcohol liaison nurse (ALN) service has been shown to be effective in reducing alcohol-related harm. In response to findings, a new electronic ALN referral pathway was designed to streamline the referral process and promote the role of the ALN. The aim of this audit was to evaluate this new electronic ALN referral pathway.*  
(Dr Richard Cherry, Belfast Health and Social Care Trust)

### **2. An evaluation of a tiered inter-related intervention for reducing hazardous / harmful alcohol misuse**

*In Northern Ireland, alcohol misuse impacts negatively on individual drinkers, families and communities. The Alcohol and You Project in the South Eastern Health and Social Care Trust is a funded project providing a range of inter-related services with the Trust and alcohol/drug misuse charities. It includes a self-help interactive website, brief intervention drop-in clinics and counselling services. Queen's University Belfast is currently evaluating the effectiveness of the project to reduce hazardous or harmful drinking among adults in the area.*  
(Mrs Ciara Close, Queen's University Belfast)

### **3. Are shared education networks social?**

*This study addresses the lack of research on the social structures underpinning inter-school collaboration in Northern Ireland and discusses the staff relationships that have evolved in the context of shared education.*  
(Mr Gareth Robinson, Centre for Shared Education, Queen's University Belfast)

## Creating the conditions

**Chair: Dr Naomh Gallagher, PHA**

### **1. Regenerating Environments and Communities Health (REACH)**

*The REACH Project aims to empower individuals, families and communities faced with inequalities in health to improve their health and wellbeing through interaction with, and improvement of, their environment.*  
(Mrs Lynne Smart, Southern Health and Social Care Trust)

### **2. Enough is enough: a scoping study of initiatives to tackle food poverty in Belfast**

*This project aims to harness the expertise of Health and Social Care professionals, city councillors, welfare officers, food banks, community and faith-based organisations, and strategic bodies across Belfast to collectively address the issue of food poverty. The project involves a scoping study to collate the most up-to-date information on work being carried out across the city to help tackle food poverty. The research was commissioned by the Belfast Food Network, carried out by Advice NI and funded by the PHA.*  
(Dr Liz Mitchell, Institute of Public Health in Ireland)

### **3. The toxic relationship between debt and mental and physical health in low income households in Northern Ireland**

*Research shows that rising debt not only increases depression and anxiety, but also worsens physical health. This project included a survey of 500 over-indebted members of five Northern Ireland Credit Unions in areas of significant socioeconomic deprivation.*

(Dr Declan French, Queen's University Belfast)

## **Behaviour: Nutrition and obesity**

### **Chair: Dr John O'Kelly, Royal College of General Practitioners**

#### **1. The Nutrition Takeout Series**

*To help raise awareness among consumers on the nutritional content of food and to help them make informed decisions **safefood** commissioned a succession of surveys known as The Nutrition Takeout Series. The results of which have been used to inform consumer messages about making healthier food choices when eating food out of the home.*

(Dr Charmaine McGowan, safefood)

#### **2. Evaluating the effect of free, healthy lunches in the workplace on overall health and diet in employees in Northern Ireland – A pilot study**

*The majority of adults in the UK are not meeting nutrition guidelines and, with obesity rates and associated health risk factors on the rise, initiatives to address unhealthy lifestyle choices (eg poor diet) have become increasingly important. The workplace has been identified as a potentially effective environment to promote diet and health to a large number of people. The Ulster Carpets controlled pilot study aimed to evaluate the introduction of free, healthy lunches in the workplace on employees' overall health, diet and job satisfaction.*

(Miss Désirée Schliemann, Centre for Public Health, Queen's University Belfast)

#### **3. Evaluation of a public information campaign aimed at raising awareness of obesity**

*The recently published Northern Ireland policy A Fitter Future for All aims to reduce obesity levels by 4% in the next decade. Subsequently, the PHA developed 'Choose To Live Better', a public information campaign to raise awareness of what constitutes being overweight/obese, and to encourage individuals to think about their own weight and lifestyle. The evaluation aimed to determine the campaign's impact on public perception of weight status, knowledge of obesity-related issues, and lifestyle changes.*

(Dr Karen Beattie, PHA)

## **Building the evidence base**

### **Chair: Miss Naomi Roberts, Equality Commission for Northern Ireland**

#### **1. A systematic review of technology-based behavioural change interventions applied during pregnancy**

*A study to determine the relevancy of designing a behavioural change versus a shared-decision making intervention.*

(Dr Janine Stockdale, Ulster University)

## **2. Changes in the financial risk of food poverty over time**

*Food poverty is an important public health issue. There are households whose financial resources are considered insufficient to provide an adequate diet for their members, thereby putting households at risk of food poverty. This study attempts to examine changes in the financial risk of food poverty over time using household expenditure data.*

(Ms Lorraine Fahy, Institute of Public Health in Ireland)

## **3. Dying early: dying unnecessarily**

*Potentially avoidable mortality is based on the concept that premature deaths from certain conditions shouldn't occur in the presence of timely and effective healthcare. This study provides analysis of potentially avoidable mortality in adults of working age in Northern Ireland from 2001–2012.*

(Dr Andrew Gamble, PHA)



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