

Seventh Annual ECR Conference

11th June 2024

Calman Learning Centre



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Programme

Welcome and Introduction: Jonathan Wistow

10:00-10:05

Session #1: Talks

Mohi Ziyachi (Chair)

10:05-11:20

10:05	Understanding Changes Over Time: The Importance of Longitudinal Data Analysis Germaine Uwimpuhwe
10:20	Reorienting Western Theories of Atmospheres: A Case Study of Qi-based Holistic Medicine in Taiwan and Northeast England Chung-Yen Cheng
10:35	A longitudinal study of English-speaking anxiety and psychological adjustment among international student sojourners in the UK Qian Sun
10:50	Do repetitive thinking and pain catastrophizing predict dysmenorrhea ('period pain') and negative affect? Gabrielle Sands, Callie Amsterdam
11.05	Distancing, PPE, and moral distress in England's hidden care landscape Andrea Lambell

Refreshment Break

11:20 – 11.30

Session #2: ECR Career Development Panel and Q and A: Hints and Tips

11:30– 12:30

Lunch Break and Poster Session

12:30– 13:30

P1	Investigating the association of pain catastrophizing and repetitive thought with dysmenorrhea and negative affect Mason Peach and Kathryn Zhu
P2	Research on professional experiences and well-being of early childhood teachers in professional learning communities in China Yuting Guo
P3	Looking at the Echo: An Investigation into the Lived Experience of the Transthoracic Echocardiogram Charlotte Lock
P4	The Role of Hormonal Fluctuations and Oral Contraceptive Use on Mood and Emotion Regulation Ava Haughton
P5	Neurodevelopmental Insights into Early Number Word Learning Nina Sofie Jost

Numbering

P6	Investigating Regularisation methods of High Dimensional Data: Natural Language Processing in the Deliverance of Digital Mental Healthcare Toby O'Keefe
P7	Cross-cultural differences between International Chinese Students (ICS) and UK Home Students (UHS) Wenjing Zheng

Afternoon Session Introduction: Andrea Lambell

13:30– 13:35

Keynote Presentation: Professor Fuschia Sirios

13:35 – 14:10

Procrastination, health and well-being: A journey towards understanding

Refreshment Break

14:10 – 14:30

Session #3: Talks

Leanne Trick(Chair)

14:30 – 15:30

14:30	Features of structuralist insulation in pharmaceutical spending governance Ben Main
14:45	Life after Loss: Grief, Community and the Donor Family Network Johanna Thren
15:00	Neurodivergent Pupils' School Distress and Attendance Difficulties Chloe Fielding
15:15	Hans Mol's 'Sacralization of Identity' Aptly Defines Religion: How the Play and Musical 'Spring Awakening' Transcend to a Religion for Depressed Teenagers. Mirran Morrison
15:30	Troubled guts and disrupted microbes - Seeking cure for functional gastrointestinal disorders in urban India Erika Patho

Closing Remarks, Awards and Thank You

Jonathan Wistow

15:45 – 16:15

Early Career Researchers

At the Wolfson Research Institute for Health and Wellbeing (WRIHW) we include a focus on the importance of nurturing its early career researcher (ECR) community. Our ECR community mirrors the interdisciplinary commitment of the WRIHW, with PhD students in anthropology illuminating a brighter side to ayahuasca tourism in South America, peers in bioscience ironing out some truths about dementia, and a wide variety in-between. Improving health and wellbeing is not restricted to a particular academic discipline, and neither are we.

The main goals of the ECR committee are:

- To increase the sense of community between ECRs within the WRIHW
- To increase the visibility of ECRs within the WRIHW, and to wider audiences
- To offer ECRs within the WRIHW opportunities to develop their research, CV and understanding of what a career in research can look like

If you are interested in joining our ECR committee please contact Jonathan Wistow. If you are interested in becoming a Postgraduate Associate of the Institute please visit dur.ac.uk/research/institutes-and-centres/wolfson/ecr The

ECR Committee

Jonathan Wistow	ECR Director, Sociology Department
Leanne Trick	ECR Co-ordinator, Psychology Department
Andrea Lambell	Anthropology
Dafni Lima	Law
Charmelee Ayadurai	Business School
Mohi Ziyachi	Sociology
Thuy-vy Nguyen	Psychology
Kate Cowen	Psychology
Richard McMann	Psychology

The Early Career Researcher Conference

This conference aims to showcase the wide range of Health and Wellbeing research at Durham University and promote interdisciplinary work amongst Early Career Researchers. The conference will feature an introduction by Jonathan Wistow, Co-Director of the Wolfson Research Institute for Health and Wellbeing as well as a keynote by Professor Fuschia Sirios, Professor of Social and Health Psychology.

There will be presentations and posters by fellow ECRs. There will be time for questions and conversation, networking and collaboration. Prizes will be given for the best poster and best talk.

Thank you and please enjoy!

The ECR Committee



Session 1: Talks

10.05 – 11.20

Chaired by Mohi Ziyachi



1.

Understanding Changes Over Time: The Importance of Longitudinal Data Analysis

Germaine Uwimpuhwe
Department of Mathematical Sciences

Longitudinal data analysis is crucial for understanding changes over time within subjects across various research fields, especially medicine, psychology, and social sciences. It also helps us understand whether changes are treatment-dependent or not and how they differ among different groups of patients. This approach involves repeated measurements collected from the same patients or subjects, providing a rich source of information about individual trajectories. Traditional methods like linear regression are inadequate for analysing longitudinal data due to the inherent correlations between repeated measures within subjects.

Mixed-effects models, including linear and non-linear variants, are powerful tools for handling the nested and hierarchical structures typical of longitudinal data. These models effectively account for the correlations between repeated measures within subjects, enabling researchers to capture fixed effects (common to all subjects) and random effects (subject-specific variations). This dual capacity allows for more accurate and nuanced insights into the data.

We introduce a new approach for analysing longitudinal data which does not require distributional assumptions on the model, hence producing robust results from longitudinal data. We also test for inclusion or exclusion of random effects in the longitudinal model to check whether the model has adequately captured the unobserved variability between patients or subjects.

To illustrate the application and benefits of our approach for longitudinal data analysis, we have used real data from a study involving repeated health measurements. In examining the pharmacokinetics of a medication like theophylline, longitudinal data can provide detailed insights into how drug concentrations change over time within individual patients. Using non-linear mixed models, we can better understand how factors such as patient-specific elimination, clearance and absorption rates influence these changes. Beyond specific examples, longitudinal data analysis helps advance research methods. It allows for examining how interventions impact subjects over time and identifying factors that predict changes. These capabilities are crucial for creating better treatments, interventions, and policies.

In summary, longitudinal data analysis is a vital tool for understanding how things change over time within subjects. By using advanced statistical models, researchers can reveal important insights that guide practice and policy in many fields. This approach not only improves our understanding of specific issues but also helps develop effective, tailored solutions in various areas.

2. Reorienting Western Theories of Atmospheres: A Case Study of Qi-based Holistic Medicine in Taiwan and Northeast England

Chung-Yen Cheng

Department of Geography

In this presentation I will share the preliminary thoughts I have about my PhD project. I study qi-based holistic medicine and explores its sense of body and method of treatment (e.g., Tai Chi, acupuncture), which, I show, offer alternatives to modern biomedical thinking. Qi [氣] means vital force in Chinese and has been compared to 'atmosphere' in Western phenomenology, but this research argues that these two are not the same.

Using participant observation, interviews, focus groups, content analysis, diary-interviews, drawing, and autoethnographic methods to collect data on people's experience with qi-based holistic medicine, I will show that qi is more practice-based than atmosphere. I will also show that qi enables mind-body unity and a visceral account of embodied experience through practice – as opposed to atmosphere (and its associated concept 'affect') which presumes a partitioned mind and body and focuses on the flows 'between' bodies only.

Furthermore, this research will reveal the personal as political by studying qi-based holistic medicine across cultures, namely Taiwan and Northeast England. I will explore how the body experiencing qi may be differentiated by gender, race, class, size, age, and dis/ability, as opposed to current literature of qi which usually only draws evidence from (East) Asia and overlooks the identity markers on bodies. I will also explore how these identity markers might influence the way qi is experienced and thus provide new perspectives for the philosophical discussions of qi. Cross-cultural comparison will also allow me to show that qi-based holistic medicine is evolving and globalizing, instead of statically ancient and confined to East Asia. The intimate accounts provided by my participants across different cultures will allow me to address the bioethical concerns surrounding holistic medicine – usually about its 'effectiveness.' I will critique how these concerns stem from a concept of health that is shaped by modern biomedical thinking, and in turn I will propose an alternative way of thinking about the bioethics of holistic medicine.

3.

A longitudinal study of English-speaking anxiety and psychological adjustment among international student sojourners in the UK

Qian Sun

Department of Education

In order to fully acclimate to the new country, international students (ISs) need to learn the new language and adapt to the target culture. It is stressful for ISs to adapt to the foreign language environment (Savicki, 2012; VandeBerg et al., 2012). In addition, students may experience foreign language anxiety (FLA) when they do not understand what is being said or are unable to easily form the desired response in foreign language (Horwitz, Horwitz & Cope 1986).

This study is one of the few studies examining the psychological adjustment of ISs and focus on the anxiety of speaking English (FLSA) as a foreign or second language in and outside of classroom. This study divided different concepts into "trait" and "state" from a dynamic perspective. This longitudinal study was to investigate the growth as well as changing trends of pre-sessional course students' foreign language speaking anxiety and psychological adjustment in the UK. Some pre-sessional course students (N=251) of eight UK universities joined the study, from 10 different regions and countries, and from 4, 6 and 10 weeks of pre-sessional course. The study conducted twice trait questionnaire at the start and end of pre-sessional course and repeated twice per week experience sampling methods over the pre-sessional course of 4,6,10 weeks. Besides, the semi-structured interview has been used to collect international students' thoughts and considerations about FLSA and psychological adjustment at the end of pre-sessional course.

The findings from trait questionnaire indicated that while the participants' FLSA decreased during the pre-sessional course. Through the analysis of data from experience sampling methods, it was found that the initial anxiety levels were not very high and showed an overall downward trend. Although there is an overall downward trend, the changing trends vary widely from person to person. The pedagogical implications of the findings are discussed.

4.

Do repetitive thinking and pain catastrophizing predict dysmenorrhea ('period pain') and negative affect?

Gabrielle Sands and Callie Amsterdam

Department of Psychology

Background: Dysmenorrhea (characterised by painful menstrual cramps) is common and negatively impacts quality of life. The experience of pain is not well understood as severity of underlying pathology is not necessarily correlated with pain intensity.

Additionally, there is a strong bidirectional association between dysmenorrhea and depression. However, the causes of depression in dysmenorrhea and the mechanisms linking dysmenorrhea and depression are still unknown. Cognitive processes including pain catastrophizing (PC) and repetitive thought (RT) have been associated with pain intensity and depression in other physical health conditions.

Method: A cross-sectional, online, survey study was conducted to investigate whether PC and RT predict pain intensity and depressive symptoms in individuals with dysmenorrhea. A convenience sample of adults who menstruate (n=182) completed standardised self-report questionnaire assessments of dysmenorrhea, depression, negative affect, RT and PC. Custom questions captured information about menstrual history and recent pain experience.

Results: Multivariable regression analysis, that included both PC and RT as predictors and that also controlled for other important covariates, indicated that greater PC predicted more severe dysmenorrhea. In the subset of participants (n=89) who met clinical threshold for dysmenorrhea multivariable regression showed that elevated PC predicted worse recent menstrual pain intensity. Additionally, in the subset of participants with dysmenorrhea, elevated RT predicted greater depressive symptoms and negative affect. Overall dysmenorrhea and depression were moderately positively correlated. Exploratory mediation analyses suggested that dysmenorrhea predicted depression partially via elevated RT, and that depression predicted severity of dysmenorrhea partially via elevated PC.

Conclusion: This study suggests that cognitive processes are implicated in the experience of pain and depression amongst individuals with dysmenorrhea, and that PC and RT may help to explain the bidirectional association between dysmenorrhea and depression. These findings have implications for future management of dysmenorrhea, highlighting the need for integrated approaches to treatment - specifically raising the possibility that PC and RT are psychological processes could be targeted to relieve pain and depressive symptoms, thereby improving overall quality of life among individuals with dysmenorrhea. Future research should seek to confirm the findings of this study longitudinally.

5.

Distancing, PPE, and moral distress in England's hidden care landscape

Andrea Lambell

Department of Anthropology

A pre-existing army of unpaid carers in England was effectively abandoned at the outset of the Covid-19 pandemic. Even beforehand, family, friends, and neighbours had increasingly moved from informally plugging the gaps to being the main source of support for people in need of social care in the community. For many, distancing rules and decision-making around scarce PPE resulted in the severance of all remaining links with professional care – links which still awaited reconstruction two years later. Moral distress is the psychological response which arises when 'one knows the right thing to do, but institutional constraints make it nearly impossible to pursue the right course of action' (Jameton, 1984:6). Potentially morally injurious experiences (PMIEs) are defined by Litz et al. (2009:697) as 'perpetrating, failing to prevent, or bearing witness to acts that transgress deeply held moral beliefs and expectations' and by Shay (2014:183) as 'a betrayal of what's right, by someone who holds legitimate authority, in a high-stakes situation'.

These concepts underpin an unexpected theme in my PhD research project which aimed to identify the barriers and facilitators to health and care communication in the presence of personal protective equipment (PPE) and forced denial of touch and proximity. Between August and October 2020, I circulated an online survey with the intention of recruiting interview participants to talk about their experiences. I identified multiple incidences of moral distress when I conducted a case-based reflexive thematic analysis of experiences described by the 464 survey respondents and by 33 people interviewed between September and December 2020, of whom nine were re-interviewed between March and May 2022. Over 80% of the survey participants, and all interviewees, had given and/or received care in the presence of PPE and distancing.

Participants' experiences revealed how acts of commission and omission concerning PPE and distancing led to instances of PMIEs. They also exacerbated pre-existing hidden moral distress in ordinary people who are an essential part of the health and care infrastructure – even though they may not even acknowledge themselves as such – and intensified the dilemmas faced by professional health and care workers who also have unpaid family-oriented responsibilities.

Session 2: ECR Career Development Panel and Q and A: Hints and Tips

11.30 – 12.30



Poster Session

12.30 – 13.30



P1.

Investigating the association of pain catastrophizing and repetitive thought with dysmenorrhea and negative affect

Mason Peach, Kathryn Zhu

Department of Psychology

Background: Dysmenorrhea (characterised by painful menstrual cramps) is common and negatively impacts quality of life. The experience of pain is not well understood as severity of underlying pathology is not necessarily correlated with pain intensity. Additionally, there is a strong bidirectional association between dysmenorrhea and depression. However, the causes of depression in dysmenorrhea and the mechanisms linking dysmenorrhea and depression are still unknown. Cognitive processes including pain catastrophizing (PC) and repetitive thought (RT) have been associated with pain intensity and depression in other physical health conditions.

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Conclusion: This study suggests that cognitive processes are implicated in the experience of pain and depression amongst individuals with dysmenorrhea, and that PC and RT may help to explain the bidirectional association between dysmenorrhea and depression. These findings have implications for future management of dysmenorrhea, highlighting the need for integrated approaches to treatment - specifically raising the possibility that PC and RT are psychological processes could be targeted to relieve pain and depressive symptoms, thereby improving overall quality of life among individuals with dysmenorrhea. Future research should seek to confirm the findings of this study longitudinally.

P2.

Research on professional experiences and well-being of early childhood teachers in professional learning communities in China

Yuting Guo

Department of Education

Neurodegenerative diseases represent a major threat to human health worldwide. Currently there are approved treatments, which provide only symptomatic relief, not curative resolution. Progress is primarily impeded by the complex aetiology of AD, hence that the pathogenesis has not been fully elucidated. Retinoids, vitamin A derived substances, appear to be essential in neuronal cells and have been implicated in AD pathogenesis.

This study explores the pharmacological mechanisms and neuroprotective properties of a lead dual genomic and non-genomic synthetic retinoid, 4-[2-(5,5,8,8-Tetramethyl-5,6,7,8-tetrahydroquinoxalin-2-ylethyl)nyl] benzoic acid (NVG645). The potential therapeutic effect of NVG645 was analysed in vitro using human SHSY5Y neurons, rat C6 glioma and human HMC3 microglia cells at an administered concentration of 1-10 nM. Histological, functional and a series of biochemical analyses were performed. NVG645 significantly induced neurite outgrowth and dendritic branching, indicative of neuronal regeneration. Biochemical studies revealed that NVG645 significantly ameliorates neuroinflammation, suppressing cytokine release (TNF α , IL-6), and attenuates neurotoxic microglial activation. An additional protective role was identified for NVG645 against oxidative stress, where a significant reduction in peroxide sensitivity was observed. Furthermore, NVG645 elicited both senolytic (glia) and pro-autophagy effects (in both neurons and glia), and reduced peroxide-induced IL-6 release (microglia).

Overall, these neuroprotective, neuroplastic and neuro-reparative effects suggest NVG645 shows promise as a novel therapeutic strategy for the treatment of AD.

P3.

Looking at the Echo: An Investigation into the Lived Experience of the Transthoracic Echocardiogram

Charlotte Lock

Department of Geography

The echocardiogram is a medical imaging technology routinely used in cardiac care, with nearly 300,000 performed in England between April and May 2019 (Blake, 2020), and yet there has been little research into the importance and consequence of this technology for the patient's lived experience and the medical encounter. In response to this absence, my research explores the experiences of those with congenital heart conditions specifically, to enquire into the implications making the heart differently visible by means of ultrasonic imaging technology – as an organ imbued with complex historical and cultural meaning. Through conceptualising this imaging technology as a form of enactment, it interrogates (1) spatialities and topographies of production/interpretation/possession of medical images, (2) the multiplicity of the heart, and (3) what this cumulatively means for patient experience – as simultaneously a body, image and actor (Radstake, 2010).

P4.

The Role of Hormonal Fluctuations and Oral Contraceptive Use on Mood and Emotion Regulation

Ava Haughton

Department of Psychology

The fluctuation of female sex hormones are hypothesised to cause increased rates of depression. This, and emotion regulation, remain underexplored. This paper used the Beck Depression Inventory (BDI), Emotion Regulation Questionnaire (ERQ) and the Rumination Response (RRS) to measure mood, cognitive reappraisal, emotion suppression and rumination. Young adults completed these questionnaires and their data split into three groups: males, naturally cycling females and combined oral contraceptive females. When analysing for statistical differences between these groups, no significant differences were found for mood or cognitive reappraisal.

However, naturally cycling females were found to ruminate more than males. Additionally, combined oral contraceptive females suppressed their emotions less than males and naturally cycling females. To follow-up, multiple regressions were used to further understand the data. Herein, ER strategies and hormonal fluctuation collectively predicted mood, explaining 40.5% variance. However, ER strategies individually predicted mood whilst hormonal fluctuation did not. Altogether, this research contradicted previous notions that mood will significantly differ depending on hormonal fluctuation.

These results do indicate that negative strategies, evidenced through rumination and suppression, may be susceptible to hormonal fluctuation. Thus, this warrants further exploration into this area.

P5.

Neurodevelopmental Insights into Early Number Word Learning

Nina Jost

Department of Psychology

Strong maths skills are not only important for success in school, but they are also essential for economic and occupational success later in life. Children begin to learn the exact meaning of small numbers (e.g., two = **), by learning each number one-by-one until they eventually become Cardinality-Principle-knowers. The Cardinality Principle (CP) states that the last number reached in a count list represents the size of the whole set. However, it remains unknown how different brain networks support the acquisition of the CP and if there is a developmental shift in the brain regions supporting children's number word processing.

For the first time, we will investigate the conceptual changes in children's number word knowledge using functional near-infrared spectroscopy (fNIRS). Behavioural and neuroimaging data will be collected from preschoolers to capture this crucial developmental window of children's number word learning. We will use a well-validated number task (Give-N-Task) to determine children's number-knower level (one-, two-, three-, four- and CP-knowers). Children will then wear an fNIRS cap while completing the number word-quantity mapping task to compare brain activity across knower-levels to examine neurobiological differences in number word knowledge. Based on previous findings with adults and older children, we expect to see bilateral intra-parietal networks indicating an understanding of numeracy in the CP-knowers. In younger children, however, we expect to see activation in the left inferior frontal and temporo-parietal language regions.

This will be the first study to date to examine whether there might be a shift in brain regions as children learn number words. Conducting this research in the North East of England will allow us to examine children's number word learning in a population that faces significant barriers in meeting early learning milestones. This research has therefore the potential to identify children who have the greatest need for additional educational support and provide insights into when educational interventions are most effective. Data collection for this study will begin in the spring, and preliminary data will be presented at the conference.

P6.

Investigating Regularisation Methods of High Dimensional Data: Natural Language Processing in the Deliverance of Digital Mental Healthcare

Toby O'Keefe

Department of Mathematical Sciences

In many domains high-dimensional learning problems are becoming increasingly prevalent following rapid technological advancements that facilitate extensive data collection. A domain which has seen significant development in the last decade is digital mental healthcare. One such example is the development of Natural Language Processing text classifiers that are used to aid depression diagnosis, a problem which naturally resides in high-dimensions.

Developing precision healthcare methods which implement complex mathematical tools can lead to a host of primary problems, such as model incomprehensibility and patient distrust. But mathematically these issues may be more fundamental since complex machine learning tools require extensive knowledge for successful, and safe, implementation. This work aims to introduce high-dimensional space, give caution to its potential perils, develop some well known high-dimensional techniques and introduce a mental health study to emphasis the challenges - and rewards - of high- dimensional data. We find that whilst high-dimensionality warrants caution, it is deserving of attention and provides a great opportunity to develop healthcare research, ushering in a new wave of healthcare.

P7.

Cross-cultural differences between International Chinese Students (ICS) and UK Home Students (UHS)

Wenjing Zheng

Department of Psychology

Anxiety is a multifaceted emotion that has been extensively researched in the field of psychology and can be viewed from various perspectives, e.g. cognitive perspectives (Eysenck, 2013), cross-cultural perspectives (Panova, et al., 2020), and psychophysiological perspectives (Hamm, 2020) and ecological perspectives (Liu et al., 2022). Charles Spielberger (1977) makes a distinction between state anxiety (impacted by transient situational stress) and trait anxiety (remains relatively stable over time), addressing performance differences in different cultural contexts and anxiety arising from cultural adaptation (Spielberger et al., 1971; Endler et al., 1991; Baloglu et al., 2007). Chinese students studying in the UK must adjust to the obstacles of a cross-cultural experience that brings about socio-cultural challenges (Lin et al., 2001; Young, 2017; Wang, 2018).

Certain types of negative life events can trigger state anxiety. This is because negative life events can activate biological vulnerability to stress, thereby reinforcing the anxiety response (Barlow, 2000; Weinberg et al., 2022). People with trait anxiety are more likely to experience negative life events (Barlow, 2000; Chorpita & Barlow, 2018). People with high trait anxiety are more likely to experience elevations in state anxiety (Dong et al. 2022), whether or not there are such negative life experiences, whereas we would expect differentiated responses with those who chiefly experience state anxiety.

The cultural differences in anxiety between East and West are different in A) the perspective of attribution aspect (Gopalkrishnan, 2021; Wang, 2022); B) shaping how anxiety is expressed and managed (Hofmann & Hinton, 2014; Crandon et al., 2022); C) how to seek help and support (Foster et al., 2021; Magnusdottir and Thornicroft, 2022). Possible reasons for differences include A) the sense of stigma in Asian cultures (e.g., social norms and expectations; Heinrichs et al., 2006; Ran et al., 2021); B) significant power differentials (Singh et al., 2020); C) the influence of spirituality and religion (Hechanova & Waelde, 2017).

Available evidence shows that interventions, such as cognitive behavioural therapy (CBT; Modini & Abbott, 2017; Tolin, 2023), exposure therapy (ET; McGuire, & Storch, 2019; McLean et al., 2022), mindfulness therapy (Wang et al., 2018), physical activities (Singh et al., 2023), nature therapy (Evans, 2023), technology-based approaches, such as digital interventions (e.g., virtual reality interventions, guided self-help apps) somehow (did not) improving anxiety. The specific differences in how ICS and UHS cope with negative events and anxiety, as well as the reasons behind these differences, remain unclear. There is a lack of clear conclusions regarding specific cultural differences and how aspects of cultural formulation are reflected in the interventions (Li et al., 2023).

The number of participants is around 45, including both students and staff. The inclusion criteria for students are undergraduates (UG) and postgraduates (PG) aged 18-25, who are proficient in either Chinese or English, and who view themselves as prone to anxiety and are willing to engage in discussions about their negative life experiences. The exclusion criteria for students are individuals with current mental health issues. The staff participants are those who work in student support services. From conducting semi-structured interviews and surveys, this project aims to explore the cross-cultural differences between International Chinese Students (ICS) and UK Home Students (UHS) to identify coping resources for anxiety and develop intervention guidelines to improve mental health services in Higher Education.

Keynote

13.35 – 14.10

Procrastination, health and well-being: A journey towards understanding

Professor Fuschia Sirios

Professor of Social and Health Psychology



Session 3: Talks

14.30 – 15.30

Chaired by Leanne Trick



1. **The theoretical and institutional significance(s) of stable state pharmaceutical spending with reimbursement 'mix' increase**

Ben Main

Department of Sociology

Government pharmaceutical spending policy - reimbursement policy - is an arena within capitalism where state and external actors negotiate or compete for command over the parameters of social equity via, for example, the level of citizen drug coverage and the magnitude of prices/expenditure. Across the capitalist world government pharmaceutical expenditure is high without necessarily generating better health outcomes. This paper considers the implications of New Zealand as a negative case in pharmaceutical pricing governance in the liberal capitalist democracies where expenditure is low but citizen drug coverage has steadily increased ('price stable reimbursement mix').

Drawing on mixed qualitative data set drawn from the wider reimbursement policy I examine this phenomena for its sociological significance across a number of vantages including the mechanisms of pricing strategies, power and intra elite power struggle and normative-ideological implications. The negativity of the New Zealand case is important to understand for what it reveals about the limits of the pharmaceutical industry's supply side power where the forces that shape health technology expenditure are state-actor mediated

2. Life after Loss: Grief, Community and the Donor Family Network

Johanna Thren

Department of Anthropology

My ethnography explored the experiences of donor relatives after consenting to deceased organ donation (OD) in England, consulting donor relatives, charities, documents, and other volunteer support providers. A rich support and education tapestry run by proliferating intermediaries aiming to provide comfort and closure emerged.

My presentation addresses the emerging experiences of grieving relatives asked to make a decision about organ donation in the hospital setting. In England, the soft opt-out law that came into effect during the Covid-19 pandemic means family members always get the final say about whether organs can be donated. They decide what organs are donated, regardless of any decisions previously registered by the potential donor. This “presumed consent law” tells relatives that the donor was presumed to have consented to donation if they did not actively opt-out of the donation decision. Relatives are asked whether they wish to “honour” that decision.

During my research, I became aware that the donor body has an ambiguous status somewhere between life and death during this time. The vital functions are being kept active, however, the certainty of the death of the donor or their brain death have been confirmed and communicated to their relatives. When deciding about organ donation, relatives are in an unfamiliar space. The ICU environment and thoughts about organ removal, coupled with a desire to say “goodbye” to the donor can be difficult to navigate. Charities like the “Donor Family Network” try to reach out to relatives to offer support after the donation process and to act as an ongoing point of contact once official service provision stops. My presentation discusses how this space is navigated and developed to improve donor family experiences and support access.

3. Neurodivergent Pupils' School Distress and Attendance Difficulties

Chloe Fielding

Department of Psychology

Purpose: The UK has an attendance crisis in mainstream schools and evidence suggests that it disproportionately impacts neurodivergent pupils. Research on school distress and attendance has predominantly consulted parents and teachers and neglected the voice of the pupils.

Methods: This qualitative, online interview study involved neurodivergent adolescents (n=30; 11-16 years), who were currently experiencing school distress and attendance difficulties, to ask how and why neurodivergent pupils they experience school distress and attendance difficulties.

Results: Using thematic analysis, the interviews highlighted that there was significant variability in lived experiences, but multiple factors such as sensory differences, uncertainty at school, social challenges, poor neurodiversity understanding, and a lack of an alternative, commonly coalesced to create distress. The wide-ranging impacts of school distress extended far beyond challenges attending school. The young people did not feel that the current education system met their needs.

Conclusion: The research provides first-hand insights into school distress and attendance difficulties from young people who are experiencing these real-world issues. The results contribute to considering how best to approach the current UK school attendance crisis in mainstream schools that is disproportionately impacting neurodivergent pupils.

4.

Hans Mol's 'Sacralization of Identity' Aptly Defines Religion: How the Play and Musical 'Spring Awakening' Transcend to a Religion for Depressed Teenagers.

Mirran Morrison

Department of Theology and Religion

I propose that the musical *Spring Awakening* can transcend the realms of entertainment to collaborate with Hans Mol's religious theory of the sacralisation of identity to intervene in teenage depression and suicidality. This is done through an appreciation of depression as an attack on positional normalcy and an identity crisis, and a presentation of *Spring Awakening* as a religion and alternative spiritual treatment.

I focus particularly on the character of Moritz and how the contribution of academic pressures and a need for validation in attachment-insecure teenagers can lead to an increased risk of suicide. The alternative to this is representation and espoused understanding, displayed in the way we internalise aspects of our surroundings and 'attach' to them, placing them on a pedestal; this is how I link the musical *Spring Awakening* back to Hans Mol's religious theory of the sacralisation of identity

5.

Troubled guts and disrupted microbes - Seeking cure for functional gastrointestinal disorders in urban India

Erika Patho

Department of Anthropology

My PhD project is an ethnographic study of functional digestive disorders and related gut pathologies in contemporary urban India. Based at a gastroenterology department of a distinguished medical institute and simultaneously attending outpatient consultations of an Ayurvedic clinic, I follow how patients suffering from irritable bowel syndrome (IBS) are seeking care in and across the medical pluralist landscape.

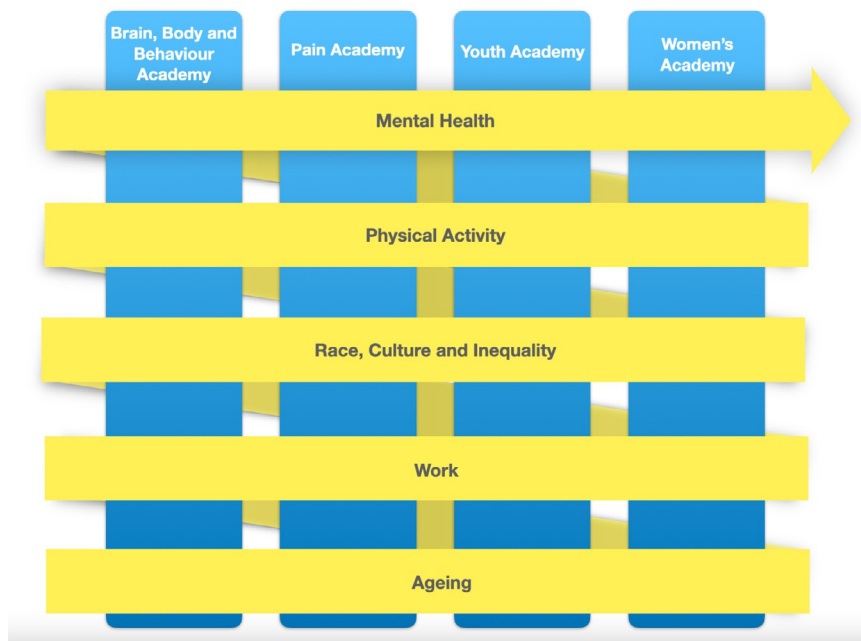
Conversing with patients about their personal narratives and the complexities of their long-term medical trajectories, I aim to shed light on how they perceive, interpret and reconcile with their diagnoses in the absence of an organic cause. In this pursuit, the invisible worlds of microbes and troubled guts become the object of scientific experiments and tests, promising detectable results in the hope of facilitating a reliable medicalized solution. Besides inquiries into the established technologies of care and cure of IBS, the research is set out to engage with patients' fragmented notions of 'their' illness, their hopes, and their distinctive tactics of negotiating their condition and care. I examine how deeply embedded cultural notions concerning diet, local ideologies about social norms and health-seeking behaviour in Indian society influence how patients make meaning of their disturbed guts and navigate the attached label of IBS.

The study aims to advance our understanding of how microbiome science is embodied and enacted within and between the realms of biomedical and Ayurvedic practice, contemporary clinical research and patients' bodies and lifeworlds in the Indian context.

About the Wolfson Research Institute for Health and Wellbeing

The Wolfson Research Institute for Health and Wellbeing is Durham's flagship interdisciplinary Institute tasked with delivering the Health@Durham Strategy. Established in 2001, we foster research relating to human health and wellbeing in both developed and developing countries from the individual to global scale.

We do this through our **Challenge Academies**.



Each has been carefully built to address local and global unmet need in health-related issues. Closely aligned with the Sustainable Development Goals, these Academies have the interdisciplinary approach unique to Durham University built in. In this way, each Academy can address major problems in health and wellbeing, but also be responsive to new challenges as they arise.

We help our Challenge Academies grow, fostering networking, identifying and assisting with funding opportunities, expanding their internationalisation and ensuring impact through clinical, industry or policy collaboration. This approach is central to our core ethos where our Academies address the beginning (identifying the correct question), the middle (understanding who the problem affects and how) and the end (how we can use this knowledge to create purpose built solutions that don't just help some of the people).

So, what is it that we do?

When we think about the health of humanity, we often think about ill-health. Traditionally, many approaches to ill health are rooted in a biomedical model (what are the symptoms, what is wrong with the body and how do we fix it). This is central to pathogenesis (the study of how we get ill). However, we believe that salutogenesis (the study of what keeps us well) is of equal if not greater importance. We sit at the very confluence between pathogenesis and salutogenesis.

By investigating all of the factors that can affect human health, from socio-economic status, to psychosocial factors, through the environment, faith, familial structure, dependants and so many more issues, we can build a picture evidencing the role that each of these have in “the Picture of Health” of individuals, communities and societies. We can look for malleable factors and track how making small and big changes to how we live impacts our collective health and wellbeing. Further still, by understanding how our place in the world and our experience of health affects our bodies, we can begin to predict individual and societal health issues, with the ultimate aim of arresting their progress.

Finally, in cases of ill-health, we can evidence the efficacy of treatments not based merely on the biomedical model but also the socio-environmental model we have built through our understanding of people, their place, and how they live. By targeting treatments to those for whom they will work, we provide an evidence base to assist in clinical or policy decision making, improving efficacy, and process in a purpose-built manner.

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