The Engagement Excellence Scheme
University of Leeds
2017-18

Engagement Fellows and their projects

October 2017 – July 2018
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Who are you / your background?

Claire Brockett – University Academic Fellow in Bioengineering of the Ankle, Medical Engineer. I’m a keen PE practitioner (in terms of delivering activities to school workshops and science fairs) and am really enthusiastic about engaging the wider community with medical engineering generally, and my research specifically.

What are you doing in your current role?

I am a university academic fellow, specifically focussed on medical engineering research around the ankle joint. Nearly 2 million adults in the UK have arthritis of the foot and ankle, but compared to other joints, the treatment available doesn’t perform so well. I’m using my medical engineering skills to understand why ankle replacement joints fail, and developing new methods to predict clinical performance of new ankle replacements through experimental models.

What is your planned project about? Include objectives.

The main aim of this project is to engage with patient groups to inform some of the research direction within the ankle bioengineering group. Having presented at a patient group ‘Ask the researcher’ event previously, and spoken with the patients afterwards, it was clear that whilst they were familiar with engaging with research through clinical trials, they were less sure on how to talk to me (not being a clinical researcher) and what they might be able to contribute to engineering research. The objectives of this project are:

1. Develop links with the local patient groups to raise awareness of my ankle bioengineering work, build upon existing relationships with the LMBRU.
2. Develop materials that could be targeted to ankle patients through local clinical collaborators to invite them to engage with my research
3. Host an event at the iMBE to showcase our ongoing research, and to hold facilitated discussions with the patient groups to encourage dialogue about research priorities
4. Encourage further engagement with patients to help determine targeted research areas for the ankle for the future, through follow-up events and provision of further updates (e.g. through PPI section of LMBRU website)

What is your understanding of public engagement?

Public engagement is a spectrum of activities that can range from telling people about what you do to full engagement where the public can get involved with, influence and create research. At the moment, most of what I’ve done has been around the transmission of information, and so engagement has been quite limited. However there is a lot of value in these activities through science fairs as we can inspire future generations of scientists and engineers and help influence their key influencers (for example, at the Big Bang Fair in 2014, our all-female stand of
bioengineers helped change the mind of a parent that engineering wasn’t suitable for their daughter!)

**What is the step change for you with this project?**

The big change is communicating with a different group in a different way. I would like to be able to discuss my research aims with the patient groups affected and start getting their input on my research direction. This is going to mean learning to ask the right questions, and change my approach.

**End of scheme report**

*Image of two people building a newspaper skeleton.*

**What have you done in your project? Have you achieved your objectives?**

As outlined in my original application, I have quite a bit of experience in general public engagement – the first image shows our team building a newspaper skeleton as part of the Otley Science Fair at the beginning of the year. Over the course of the year I engaged with the PPI group at Chapel Allerton Hospital through Gwyn Cracknell, the PPI manager for the Leeds Biomedical Research Centre. My original aims were:

1. Develop links with the local patient groups to raise awareness of my ankle bioengineering work, build upon existing relationships with the LMBRU.
2. Develop materials that could be targeted to ankle patients through local clinical collaborators to invite them to engage with my research.
3. Host an event at the IMBE to showcase our ongoing research, and to hold facilitated discussions with the patient groups to encourage dialogue about research priorities

4. Encourage further engagement with patients to help determine targeted research areas for the ankle for the future, through follow-up events and provision of further updates (e.g. through PPI section of LMBRU website)

Broadly, I have achieved these – several of the PhD students within my group are now getting involved with the patient groups, and having them help us scope and develop the research documents around our studies. A key element I identified as a barrier for engagement with my research was general terminology and the concept of engineering and laboratory based research that did not have an immediate clinical factor (i.e. not being clinical trials). Through bringing the patient group into our department, we were able to introduce them to our research.

The main deliverable for the project was a patient focussed open afternoon within the research laboratories of the IMBE. I broadened the focus from just ankle research to cover activities undertaken by the whole group – so I involved several more members of academic staff, research staff and PhD students. I spent time with Gwyn on a walk-through of the labs to ensure everything was accessible for all (being as the majority of our visitors had arthritis and some had impaired mobility).

On the day, the patient group was welcomed to the School of Mechanical Engineering for lunch and an opportunity to chat with a number of researchers. We spent around one hour with short talks on the institute (Prof Ruth Wilcox), our spine research (Dr Marlene Mengoni), hip research (Dr Todd Stewart), knee research (Dr Hazel Fermor), before a team of PhD students acted as guides for small groups around our research laboratories, where more researchers were on hand to describe and explain the research. This included visits into the research laboratories to see wear testing of total joint replacement and mechanical testing of soft tissues. A trip to our imaging suite highlighted how we benefit from clinical imaging, and can use higher resolution MRI and CT data to produce patient specific computational models – where we can implement a range of conditions (such as walking, tripping, stair climbing) to see how the joint (or a joint replacement) may behave. Finally our visitors attended the measurements laboratory, where we showed them the research we do examining ‘retrievals’ – total joint replacements that have been removed from patients due to failure. This relies on patients being willing to donate their device to our research, but is an incredibly important aspect that helps us better understand how implants perform (and when they do not). We concluded with coffee and cake and another opportunity for the guests and our researchers to chat more informally.

Gwyn took feedback from the PPI group (as she does at all the ‘Ask the Researcher’ events) and it was clear that the group had really enjoyed the visit – they appreciated the opportunity to talk to the researchers and it brought to mind research that they had not realised was going on. The PhD students in particular benefitted from the event, highlighting that they had been nervous ahead of the day in how to talk to the patients, but actually found it increasingly easy as the tour went on.

We have plans to undertake specific research themed visits in future, following a similar structure (with a shorter introduction). All talks and the tour were filmed on the day and edited by the LBRC team, and will be made available through the PPI website.
Your expectation of the scheme and how the scheme has helped you with your project.

I was not entirely sure what to expect from the scheme – and clearly my own experience has been a little disjointed due to personal circumstances. However, the sessions were extremely useful, and the opportunity to engage with experienced individuals such as Delia Muir and Sue Pavitt was very helpful. Alongside the delivered elements, such as capturing feedback and ways to engage, the questions they asked of me as my project was developing really encouraged me to consider new aspects of the activity. Although sometimes we only had a few of us at the session, the cohort approach was also really beneficial as I was able to learn from what others were doing (even if their project was very different). Overall, the experience was inspiring – to see how to do things better, in opening my eyes to new ways to engage and to give me new ideas for the future.

How likely is it that the research impact has been increased /will increase through your PE project?

I feel it will increase – we will have these events on a regular basis – and this will help develop a relationship and a path for communications between the researchers and the patients. By finding common ground, gaining patient input into what we are doing will become easier – and hopefully sharing our research outputs in a clear way will also be improved.

How has the PE further diffused in your School/Institute? What is different now with respect to PE?

We have been reasonably good at PE, in terms of school workshops and fairs for a few years now, and these have been well supported by our cohort of CDT PhD students. The big change with the event I ran was that I had many more of the academic members of staff involved with the activity. Although the amount of activities undertaken is perhaps not increasing – the range of engagement through different levels of staff has improved – and there are other academics who support me in undertaking different activities.

Has your understanding of public engagement changed during the scheme?

I would like to think that I had a good understanding of engagement before I started - particularly in terms of communication styles with different audiences. However, much of my previous experience was around transmission of what we were doing, rather than engaging in conversation about the research. This scheme has helped me develop skills and techniques to undertake true engagement – seeking opinions and input to the research being undertaken.

Have you achieved the step change you aspired to? What do you plan to do in the future regarding PE?
I hope so – it has already impacted on the activities of my PhD students, who are getting input from the PPI group on their research activities. We are planning to work with clinical colleagues at the BRC to deliver an ‘Ask the Researcher’ workshops focussed on the ankle joint. During this scheme, I also applied for a ‘Discipline Hopping’ award from the EPSRC – which would allow me to work across at the hospital to get input from patients and clinicians on the function of total ankle replacement. Whilst the proposal has not yet been heard at panel, the reviewer comments were largely positive and some highlighted my public engagement activity as something that would make a big contribution to the proposal.

Appendix:

- Breakdown of financial spend (a table is fine)

<table>
<thead>
<tr>
<th>Item</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mini-Bus transportation for patients</td>
<td>£79</td>
</tr>
<tr>
<td>Lunch, coffee, cake</td>
<td>£350</td>
</tr>
<tr>
<td>Development of materials (banner)</td>
<td>£100</td>
</tr>
<tr>
<td>Total</td>
<td>£529</td>
</tr>
</tbody>
</table>

- How many staff have you engaged with through your project?

Five academic staff and ten PhD students

- Have you developed a case study/article?

Not yet, but we are planning to put something together for the PPI website

- How many events/activities have you done (during the scheme)?

Attended three ‘Ask the Researcher’ events, delivered 4 ‘other’ public engagement events (schools workshops and science fairs), but the primary goal was delivered through a specific PPI afternoon visit.

- How many people have attended these/taken part in these?

Thirty five members of the PPI group from the Leeds Biomedical Research Centre attended the Institute of Medical and Biological Engineering for their visit.

- How many people have completing surveys/interviews/interacted on social media?

N/A – although they are editing a small film together to be put on their website here: http://leedsbrc.nihr.ac.uk/patient-and-public-involvement/
Sophy Barber, School of Dentistry

I am a dentist working in Leeds Teaching Hospitals and the University of Leeds. I am currently completing the senior part of my Specialist Training in Orthodontics and alongside this I am undertaking a PhD. My research is exploring how adolescents and parents make decisions about dental treatment for a dental condition called hypodontia. This is a developmental condition where baby and/or adult teeth fail to develop, resulting in absence of one or many teeth. I hope the findings will enable us to support young people and parents to make better decisions about their dental care, resulting in improved satisfaction and adherence.

My planned project aims to engage with young people to co-produce a website for information-sharing and peer support for people affected by developmentally missing teeth (hypodontia). The objectives are

- To identify young people to act as PPI representatives who will co-produce the project stages from two groups:
  - Students from Batley Girls School, West Yorkshire, a school serving an area of deprivation and wide ethnic diversity. Engaging with this group of young people will provide a platform for seldom-heard voices in PPIE
  - Young people with hypodontia to maintain focus on the target population.
- To establish the preferred communication platforms for young people and families to engage in health care (e.g. social media, specific website), how young people and families wish to connect to others for networking and peer support and the most effective methods for sharing information
- To develop a website using an iterative process involving piloting & qualitative feedback with other young people
- To develop a PE strategy for launching the website
- To monitor use of the website over 12 months to measure its impact

Public engagement is sharing the activity and benefits of higher education and research with the public and involves active interaction with the public to gain mutual benefits. In dentistry, PE often includes involvement of patients and the public in designing, conducting and disseminating research with the aim of increasing the impact of research and ensuring the important issues are addressed.

Across dentistry as a whole there is little evidence of public engagement (PE) in communication around dental conditions and treatment, despite the increase in patient and public involvement.
(PPI) in research. I hope my project will build capacity for future public engagement by providing me with generic skills that will have potential impact for both academic and clinical practice. My role as both a University staff member and a dental specialist working in the NHS provides an opportunity to champion PPI and PE in research, service delivery and dental care communication.

**Mid-term report**

The original project (to develop a resource for young people with missing teeth) has developed into a larger collaborative project with greater scope so development has been slowed by applications to secure funding and adequate support.

Instead the focus of my PE project has changed to an oral health promotion and education project working with Batley Girls High School and Open Wide (a dental undergraduate-led team). This collaborative project aims to enable Open Wide members to train sixth form students to deliver oral health education to primary school children (KS2).

**Groups involved**

- Batley Girls High School – 7 sixth form students and the led teacher
- Open Wide – 2 lead members plus other volunteers
- School of Dentistry staff
- Key Stage 2 students in two primary schools in Batley

**Stages**

1. Planning
   - Co-development of project between groups
   - Role of team members
   - Timescales
   - Activities and methods to gain feedback
2. Preparation and training
   - SoD staff provide training for Open wide staff about collaborative project
   - Open Wide train BGHS under SoD supervision
   - Liaison with primary schools about delivery of PE sessions
3. PE sessions
   - Baseline evaluation – knowledge and skills
   - Delivery of assembly to all KS2 and workshop to half of year
Follow up evaluation – knowledge, skills enjoyment

4. Feedback

Feedback from groups about experience of being involved

Challenges and opportunities

**My reflection**

Highly enjoyable to work with groups
BGHS and Open Wide showed real enthusiasm and development in their skills
BGHS also report to have greater understanding of HE and opportunities for health care careers
Primary schools report children enjoyed it and created a buzz
Role as coordinator sometimes challenging, especially working around so many timetables
Highlights need for planning and establishing roles and responsibilities
Value of evaluation clear – use to measure impact to inform future work

**Experience of being a member of the public**

Café plastique (café scientifique) on Tues 15th May
Speaker from Uni of York and a company that provides waste management
Lectures with Q&A
Props to encourage participation

Key points clear for lay educated audience

**End of Scheme Report**

**Project outline**

Raised in Yorkshire (RiY) is a partnership between sixth form students from Batley Girls’ High School (BGHS) and the School of Dentistry (SoD) that works to co-develop and deliver oral health research. BGHS is located in Kirklees, Yorkshire, which has the second worst UK prevalence of tooth decay in children, affecting 28.5% of children starting primary school\(^1\). Kirklees is one of the 50 most deprived districts in England based on income and employment\(^2\). The area is ethnically diverse; approximately 25% of the population report non-white ethnicity, with the majority citing Pakistani
origin and Muslim faith. Nearly 25% of the population aged 16+ years have no qualifications while only 5% report a higher education qualification.

RIY aims to provide a mutually beneficial partnership; the BGHS students have opportunities to develop research and personal skills and increase career aspirations through access to higher education infrastructure while the SoD gain a valuable opportunity to engage with a seldom heard community and widen participation to university.

This project aimed to harness the existing relationship developed through RIY to develop a new participatory research project to deliver an oral health education programme to primary schools (Key Stage 2) in the Kirklees area. The collaborative project worked with members of Open Wide, a dental undergraduate-led team (https://www.openwidedentists.co.uk), who assisted with training the BGHS students and delivery of the project. The collaborators co-developed the research project including development of the research question, study design, methods, the intervention (oral health assembly and workshop) and outcome measures.

The following objectives were achieved:

- Engagement with two primary schools and families of the children - highly positive feedback was received from the schools who reported the children were excited to have the dentists visit and really enjoyed the sessions, and parents who were interested in further dental health education for them
- Engagement with BGHS students – Reflective logs were used and these suggested students felt their knowledge, skills and confidence had been improved by the project

The aspiration for step change was an improvement in the perception of dental health education from a ‘hard to reach’ community. The feedback suggests this was achieved and the future projects developed from this project aim to build on this.

References

3. 2011 census data

http://observatory.kirklees.gov.uk/profiles/profile?profileId=163&geoTypeld

Experience of EES

The EES has exceeded my expectations and opened my eyes to the opportunities around public engagement and the importance of this for impact of research. I have greatly increased my understanding of what PE is and resources that can be used to support PE. I now subscribe to Pepnet and have been to a number of sessions that have been interesting and inspiring. Listening
...to the other projects during group sessions helped me think more broadly about my own project and take ideas across from other disciplines.

The scheme provided valuable information for me when I was thinking about how to plan the public engagement project, particularly through use of the Y diagram to think about the audience, outcomes and evaluation. Facilitation and evaluation were both areas that I had little knowledge of and these sessions provided really useful information and ideas. These were used in the EES project and also for another public engagement event (University of Leeds “Be Curious” event).

The session relating to social media has encouraged me to think of more diverse and contemporary communication methods; while this was not directly applicable in this project it will be useful for future engagement and I am working on another PE project based around social media.

Attending a PE event as a member of the public was a useful experience to see it from the other side and identify both good and bad practice. I am now attending PE events with a different perspective and I hope this will give me ideas for future PE work.

**Impact of PE**

The PE project used an existing relationship between the School of Dentistry and BGHS (RiY) but expanded the engagement to local primary schools. RiY has been a successful project and it is likely that the positive experience of the community in this project will lead to further opportunities for research and engagement. This could lead to a significant increase in the impact of research carried out in the School of Dentistry.

PE is already promoted in the School by PE champions from previous cohorts of EES. However, the understanding of PE amongst clinicians involved in research is low and I hope that I can promote PE in this field. I have encouraged PE to be considered during research design in two research grants I am involved in and it is now a discussion point in trainees’ journal clubs. I hope these small changes will contribute to diffusion of PE across the university-NHS interface and eventually become more widely incorporated into clinical research.

**Appendix**

1. **Expenditure**

<table>
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<tr>
<th>Cost</th>
<th>Estimate</th>
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<tbody>
<tr>
<td>Transport for SoD staff / Open Wide members to schools</td>
<td>£25 return per visit (x2)</td>
</tr>
<tr>
<td>Planning visits to BGHS x2</td>
<td>£25 return per visit (x6)</td>
</tr>
<tr>
<td>PE sessions at primary schools x6</td>
<td>£25 return</td>
</tr>
<tr>
<td>Group debrief and evaluation</td>
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</tr>
<tr>
<td>Equipment for workshops and evaluation</td>
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<td>----------------------------------------</td>
<td></td>
</tr>
<tr>
<td>Toothbrushes and toothpaste</td>
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</tr>
<tr>
<td>Sticker charts, quiz and snack diary</td>
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<tr>
<td>Certificate of participation</td>
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<td>Kit for workshop</td>
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<td><strong>TOTAL £225</strong></td>
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<table>
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<tr>
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<th>£1 per child for 100 children</th>
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<td></td>
<td>10p per child</td>
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<tr>
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<td>Approx. £20</td>
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<td><strong>TOTAL £180</strong></td>
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2. Engagement numbers

School of Dentistry staff 6
Open Wide UG students 15
BHGS students 8
KS2 children at primary schools 163

3. Number of events

Visits to BGHS (planning, debrief) 4
Planning visits to primary schools 1 per school
Public engagement sessions at primary schools 6
Jessica Hammett, School of History

Who are you / your background?

Dr Jessica Hammett.

I am a historian of twentieth century Britain, working as a Public Engagement Fellow and Tutor in the School of History.

What are you doing in your current role?

I am involved in the history project ‘Living with Dying: Everyday Cultures of Dying within Family Life in Britain, 1900-50s’. In this role I am working with a range of external partners. We are planning an exhibition on Remembrance to be held at Abbey House Museum, Leeds from spring 2018. We are involved in the Dying Matters partnership and attend events organised by other partners including Leeds Bereavement Forum. We are working with artist Ellie Harrison on her ‘Grief Series’. And we have a group of Family Historians who meet regularly for training events and to discuss their research.

What is your planned project about? Include objectives.

I am at the beginning of a new research project ‘Health, Housing and Suburban Working-Class Communities in Britain, 1950 to the Present’. I am using case studies of suburban council estates across Britain to examine a range of influences on health and wellbeing, and the role of social networks in the acquisition of health knowledge and provision of support. I am involving communities in this project from the outset so that they shape not only the research produced but also the way the project is famed.

During the EES I will be working with a group of women from Seacroft, Leeds. We will develop an understanding of the history and memory of this group of women’s health experiences. We will also learn about how their health experiences relate to a wider history of health in Britain, and investigate how generational experiences of health have been similar or different amongst women who live in Seacroft. As well as generating research material, I aim to develop a long term, mutually beneficial relationship with participants, and think about new and innovative ways of working collaboratively with community groups.

What is your understanding of public engagement?

My approach to public engagement is influenced by the concepts of ‘co-production’ and ‘shared authority’. Broadly, this means researching with people, not on people, and giving participants a role in the design, research and interpretation of the project. This approach also means that we recognise the value of different types of expertise, and that we respond to the preferences and needs of the groups we are working with.

What is the step change for you with this project?

I would like to develop methods which empower participants to take ownership of public engagement projects, and to better recognise the value of their own expertise.

Mid-term report

Last October I began to work with a group of eight women who live in Seacroft, Leeds, to find out more about their health experiences. Seacroft is a large estate in North Leeds, and many of the dwellings were built as council housing in the 1950s. The discussions we have been having are helping me to develop my new research project, which looks at health on suburban council estates built after the Second World War. I
am particularly interested in how residents have shared health knowledge and advice through social networks, and how support networks were developed to provide practical and emotional support during times of ill health amongst friends, family and neighbours. I think it’s really important to involve the people I am studying in my research from the beginning of the project so that they are able to shape the research questions, and so that we can develop mutually beneficial relationships and working practices.

We started the project with a trip to the Thackray Medical Museum and had a fantastic handling session which included objects relating to sex, periods and anti-aging. These were not, however, all linked to the experience of women as women’s health is underrepresented both in the Thackray’s collections and displays, so we asked the group to think about what aspects of women’s experiences that thought should feature more prominently. As well as being a really interesting trip, the session gave the women a chance to get to know each other and me better, and the activities helped break the ice. This was particularly important for this project, since health is often a difficult topic to discuss. We then had a series of discussion groups which combined my research interests with some topics the group thought were important and interesting. And we finished with a workshop event about menstruation – a topic that had come up many times during discussions. For this final session some of the women had written stories about their first period which we put on display and which will be added to an online archive, and we had two guest speakers: Claire Martin spoke about her PhD research on the history of women’s health in Yorkshire during the first half of the twentieth century; and Tina Lesley talked about her charity Freedom4Girls, which campaigns for better education and support for ‘period poverty’.

The women involved have really enjoyed all our activities; so much so that they will continue to organise a discussion group amongst themselves after I leave Leeds. They commented that it was an open, inclusive and supportive environment, and that they liked having some time to focus on themselves since they were usually looking after other people. Some of the women said that it had been very beneficial for their self-esteem, and had given them greater confidence to speak about their experiences and views. And sharing difficult experiences had helped members of the group to see how common they were.

When I started this project I wanted to find out more about women’s health experiences as preliminary research, and I wanted to develop links to Seacroft. I also wanted to develop methods which empowered the participants to take ownership of the projects, and to better recognise the value of their own expertise. I think that I have achieved this in a number of ways. The group felt empowered to lead discussions and focus on the issues that they thought were important in the sessions, and we decided together on what the outputs of the project should be. Most of all, they plan to meet without me and will run their own sessions. I’m excited to see how they decide to take the project forward, and this will be a really important resource for my future work.

End of scheme report

What have you done in your project? Have you achieved your objectives?

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Your expectation of the scheme and how the scheme has helped you with your project.

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How likely is it that the research impact has been increased /will increase through your PE project?

Very likely. I hope that once the research project is complete I will be in a position to develop a large impact case study based on this project.

How has the PE further diffused in your School/Institute? What is different now with respect to PE?

N/A

Has your understanding of public engagement changed during the scheme?

I’m not sure that my understanding of public engagement has changed, but I have certainly got lots of ideas about different approaches and activities and that has been extremely useful.

Have you achieved the step change you aspired to? What do you plan to do in the future regarding PE?
I also wanted to develop methods which empowered the participants to take ownership of the projects, and to better recognise the value of their own expertise. As noted above, I believe I have done this in a number of ways and this has definitely shaped my PE practice going forward. Of the three estates that I plan to work with, I still need to develop contact with one; Charleston, Dundee. I will build on my experience in Seacroft to do this.

Appendix:

Breakdown of financial spend

<table>
<thead>
<tr>
<th>Thackray Medical Museum</th>
<th>31/10/2017</th>
<th>198.9</th>
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<td><strong>TOTAL</strong></td>
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</table>

How many staff have you engaged with through your project?

N/A

Have you developed a case study/article? Include details, please.

Seacroft is one of the case study estates for my postdoctoral project, and important networks have been developed.

How many events/activities have you done (during the scheme)?

One trip to the Thackray Medical Museum

I held four discussion groups and one final event on ‘period stories’. The group are continuing to meet without me now that I have left Leeds

How many people have attended these/taken part in these?

Eight women attended the museum trip and discussion group

For the final event on ‘period stories’ we had two guest speakers, and two additional audience members.

How many people have completing surveys/interviews/interacted on social media?

N/A
Cat Oakley, School of Philosophy, Religion and History of Science

Who are you / your background?
I am a cultural historian of medicine, with interdisciplinary research interests across the history of medicine, labour history, literary studies, and film studies in the late nineteenth and early twentieth centuries. My research projects explore material cultures of work, health, and the body across the life course.

What are you doing in your current role?
I am currently Postdoctoral Research and Engagement Fellow on the AHRC-funded project “Endless Possibilities of Rejuvenation: Defying Ageing, Defining Youth in Britain, 1919-1948” in the School of Philosophy, Religion, and History of Science. The project examines changing attitudes towards ageing and the concept of anti-ageing in Britain in the 1920s and 1930s. I am working with three project partners – the Boots Company Archive, the Thackray Medical Museum, and the National Trust – to develop resources and events through which audiences beyond the university can engage with the histories of rejuvenation and their contemporary relevance. I am also working on a journal article for a special issue of the journal Palgrave Communications on C.P. Snow’s anonymously-published 1933 speculative rejuvenation novel New Lives for Old.

What is your planned project about? Include objectives.
I will be running a community focus group supported by my EES fellowship as part of the planning for a larger research and engagement project grant application. The workshop will be coordinated by creative facilitator Mary Robson, in conjunction with two arts and heritage organisations I have been working with already on an NCCPE seed grant. My objectives will be to draw on creative facilitation techniques and new evaluation tools developed for social prescribing to explore questions surrounding identity, nostalgia, health, wellbeing and social inequality with members of ex-mining communities in South Yorkshire. Through this, I hope to gain a better understanding of the roles that universities, arts practitioners and museums could play in understanding and addressing these issues.

What is your understanding of public engagement?
Public Engagement does not necessarily represent a single event or outcome, but can also refer to the ongoing work of developing a mutual and sustainable partnership over time between an academic and a non-academic partner.

What is the step change for you with this project?
Gaining experience of in working collaboratively with arts and museums partners in community outreach, through creative facilitation and a focus group.
The Trustees of the Thackray Medical Museum
and
The University of Leeds

warmly invite you to a preview of the forthcoming exhibition:

THE REJUVENATION EMPORIUM
Staying Young in the Early Twentieth Century

6.30pm – 8.30pm
Thursday 17 May 2018
Thackray Medical Museum, Beckett Street, Leeds, LS9 7LN

RSVP
judith.knox@thackraymuseum.org

Cat’s contract with the University came to an end at end of April 2018 and she left the University and the scheme.
The Project team

Sue Pavitt
Professor in Applied Health & Translational Research
School of Dentistry

Delia Muir
Patient and Public Involvement Officer and Engagement Fellow
Leeds Institute of Clinical Trials Research

Alexa Ruppertsberg
Head of Public Engagement with Research
Communications

Clare Gee
Public Engagement Officer
Communications