

INSTITUTE FOR HEALTH AND HUMAN DEVELOPMENT





As one of two key research institutes at UEL, Institute for Health and Human Development (IHHD) embodies a vital connection not only with our health and wellbeing research ambitions, but also in bringing together a powerful network of partnerships, collaborators and investors across East London, the UK, and increasingly in a global context. The work undertaken in both research and knowledge exchange exemplifies our commitment to impact on real world challenges, and more specifically upon the vital communities they partner with to affect positive action and change. From community interventions to firm policy directives, international networks to pioneering awards, IHHD has become a partner of choice for health industry professionals, government agencies and communities themselves. In our new Research and Knowledge Exchange Strategy 2017-22, IHHD is critical to our 5 Flagship Challenges, as well as a key focus for our investment and strategic income generation ambitions. This is an exciting time for IHHD, where we place them at the forefront of our ambitions as an institute of research excellence, and in doing so raise the impact and profile of their endeavours."

Dr Lisa Mooney
Pro-Vice Chancellor
Research and Knowledge Exchange

TABLE OF CONTENTS

About IHHD	5
IHHD Vision and Mission	7
What we do	9
IHHD Funded Research Programmes and Projects 2014-17	11
The Team	21
IHHD Publications	25



ABOUT IHHD

The Institute for Health and Human Development (IHHD) opened its doors in 2006 - set up by Professor Adrian Renton - with a remit to develop an interdisciplinary research cluster in health and wellbeing working across the university. We are now an established research institute with a substantial portfolio of externally funded research, knowledge exchange and impact. Since 2014, the Institute has been led by Professor Angela Harden who joined IHHD in 2008. Over the last 10 years we have been - and will continue to be - an organisation delivering high quality applied research and innovation which makes a real difference to the health and wellbeing of communities and individuals.

123

peer reviewed papers published by IHHD in the last REF period – 2014.

Our focus at IHHD is on the social, economic and cultural factors that influence health and wellbeing. We research and develop interventions to promote health and reduce inequalities across the life course. We use community and system wide approaches, social theory, co-production, community engagement and asset-based principles in our intervention development. We work with communities in some of the poorest, most marginalised and mobile communities in the UK - enabling both our research and interventions to be co-produced by communities, patients and service users as well as with service providers

The demand for our community engagement, co-production and asset-based approaches - which we have pioneered since 2007 – is growing. With the continued squeeze on public sector spending, there is a need for initiatives which make more efficient use of existing resources and assets and build the capacities and

capabilities of communities and individuals to look after each other and themselves.

At the same time the increasing acknowledgement that services configured and designed by experts often do not join up in people's real lives means there is a strong move towards the type of co-production approaches that we have used throughout our work.

Our values and priorities are well matched with those of the wider university. Throughout our existence we have been in the business of delivering applied research at the highest level and we have developed strong and direct lines into communities across London and the organisations which serve them. We provide UEL students with opportunities and support to make a real difference in local communities and to grow personally and learn by doing so.



IHHD VISION AND MISSION

VISION

Our vision is to locate IHHD at the forefront of international research into health and human development.

MISSION

Our mission is to:

- conduct high quality multi- and trans-disciplinary theoretical and empirical research into the social, economic and cultural production of health and wellbeing;
- develop and evaluate innovative interventions to enhance health and wellbeing;
- promote inter-sectoral actions for health at multiple levels of individual, community and society as a whole;
- provide excellent teaching and training;
- support evidence-based policies and practices.

Our growth over the last ten years has largely been driven by success in external research income generation, in particular through large programme grants from the National Institute for Health Research (NIHR), the Wellcome Trust, the ESRC, the Big Lottery and the Guttman Academic Partnership hosted by UCLPartners. We have established a local, national and international reputation for high quality applied health research.

In Ref 2014 over 80% of our outputs were judged at 3* or 4* which has resulted in QR income apportioned to the Institute for the first time. We have a vibrant research environment with a current cohort of nine PhD students.

30%

of UEL external research funding generated by IHHD



WHAT WE DO

The Institute for Health and Human Development (IHHD) is a leading public health research centre. Our focus is the health and wellbeing of communities and the social determinants of these. Our approach is strongly end user-focused and embedded in a community development and co-production philosophy. Our mix of multidisciplinary academic researchers and interventionists positions us at the unique interface between theory, evidence, policy and practice around community wellbeing. We have a strong track record of high quality evidence syntheses, primary research into complex interventions, and mixed methods study designs. Our flagship Well Communities and REACH Pregnancy Programmes have attracted significant local, regional and national research and intervention development investment by major research funders.

RESEARCH AND EVALUATION

IHHD offers high quality multi-disciplinary scholarship and research into the social, economic and cultural production of health and wellbeing. We also co-produce and evaluate innovative interventions to enhance health and wellbeing.

CONSULTANCY

We are a hub of highly skilled multi-disciplinary researchers and practitioners committed to developing innovative solutions that have and will deliver real and lasting benefits to the health and wellbeing of communities across London, the UK and globally.

TEACHING AND TRAINING

'Learning by doing' – learning, teaching, employability and student success
IHHD offers innovative short teaching and training courses at undergraduate and postgraduate levels, bespoke in-house CPD courses and supervision of PhD students.

VOLUNTEERING AND INTERNSHIPS

IHHD offers volunteers and research interns the opportunity to - increase their confidence and understanding in doing research; enhance employability skills; build knowledge of Public Health sector and access support with University studies.



IHHD FUNDED RESEARCH PROGRAMMES AND PROJECTS 2014-17

Our research is conducted around four cross cutting pillars each led by one of our world leading academics: Well Communities (Prof Gail Findlay), Starting Well (Prof Angela Harden); Ageing Well; (Prof Gopal Netuveli); and Global and Mental health (Prof Tine Van Bortel). Programmes and projects from all of our pillars are described below.

The REACH Pregnancy Programme

The REACH Pregnancy Programme [Research for Equitable Antenatal Care and Health] aims to generate high quality evidence on how to improve access to antenatal care and enhance the value and experience of that care, for pregnant women living in areas with high levels of poverty and ethnic diversity. REACH is funded by an NIHR Programme Grant for Applied Health Research. There are three main projects within the research programme.

Community REACH - is addressing 'What is the effectiveness and cost-effectiveness of a community based intervention for increasing early initiation of antenatal care and improving maternal and infant outcomes?' Together with communities, midwives and voluntary organisations in 10 sites across North East London and Essex we have co-designed an area-based intervention to support early initiation. The intervention has been implemented in all sites and we are currently collecting data on intervention outcomes, process and costs. #CommunityREACH

Pregnancy Circles – This group- model of antenatal care brings 8-12 women who are due to give birth around the same time have all their care together in a 2-hour sessions, facilitated by the same two midwives. We are exploring whether this model of care improves women's experiences of antenatal care and the outcomes for themselves and their babies. Women of different parities, risk profiles and backgrounds/language skills are included. So far we have completed a feasibility study with four Pregnancy Circles, which found that both women and midwives enjoyed this model of care, and we are just finishing a pilot trial which found that randomisation is acceptable to women and tested the data-collection procedures. (see <https://www.youtube.com/watch?v=tquTPRUZPUo>) #PregnancyCircles)

User involvement in maternity services - is addressing 'How can user involvement in planning, monitoring and improving maternity services be strengthened so that it is more effective and equitable?' We have reviewed the literature and conducted a national survey and qualitative research interviews with Maternity Service Liaison Committees to find out how maternity services have involved local women in shaping services. We are continuing to support Barts Health NHS Trust to involve more women, more effectively.

The REACH study was shortlisted for the Royal College of Midwives' Annual Awards in 2017 in the category of reducing inequalities.

Addressing low birth weight in Newham

Together with local partners and residents, IHHD carried out research funded by the borough's Clinical Commissioning Group to understand the problem of low birth-weight from different perspectives, and pilot community-based interventions to reduce its health consequences. Areas prioritised by stakeholders were care for women to improve their health before they become pregnant, and support for parents and relatives with breastfeeding and healthy infant feeding. Prevention of low birth-weight requires long-term action within wider public health strategies to promote health and reduce inequalities.

NHS Newham Clinical Commissioning Group (CCG) was shortlisted for the Health Service Journal's (HSJ) CCG of the Year award, as a result of the Newham Partnership Programme which includes two projects led by IHHD: Low Birth-Weight in Newham and Dynamic Populations.

Me and EU

The Economic and Social Research Council (ESRC)-funded site, 'Me & EU', which is complemented with a mobile phone app, aims to give young voters the key, relevant information to make informed decisions in the UK Referendum on EU membership, 2017 General Election and to understand the key issues being debated in the Brexit negotiation.

The easy-to-understand tools breaks down some of the complexities involved with the Brexit negotiations and colourfully presenting information on a range of topics, including security; the environment and sustainable energy; income and economic justice; education; travel and transport. The site is coordinated by UEL and NTU and is part of King's College London UK in a Changing Europe programme.

The website was shortlisted for the 99% Campaign Youth Digital Award at the 5th Annual IARS Research and Youth Leadership Awards 2016. IARS annual awards aim to celebrate and reward cutting-edge research and youth leadership from around the world and exemplifies the project meaningful involvement of young people.

<http://meu.open-lab.com/>

Co-designing community based diabetes services for children and young people

The co-designing diabetes services project has developed a model to empower young people to work with commissioners, providers, researchers and families to improve services and achieve better outcomes for themselves and other children and young people.

This model includes: a) setting up a collaborative 'youth forum' with processes for the recruitment and employment of paid roles such as young commissioners, young champions and young co-inquirers; b) a package of training for young people and the resources needed for ongoing support; and c) a 'how to' tool kit for commissioners, providers and researchers. The model is underpinned by formative work including reviews of existing evidence, new primary research and a first test of the model in one inner city London borough, all of which focused on disadvantaged and marginalised groups of children and young people who are more likely to experience poor health outcomes. The project has been a collaborative one between CLAHRC researchers, local providers (Barts Health NHS Trust), commissioners (Newham CCG), the local commissioning support unit, our local Academic Health Science Network (UCLPartners) and Healthy London Partnerships.

Funded by the National Institute of Health Research (NIHR) Collaboration for Leadership in Applied Health Research and Care, North Thames London.

NHS Involvement Hub.

<https://www.england.nhs.uk/participation/resources/involveyoungpeople/>

Funder's link

<http://clahrc-norththames.nihr.ac.uk/theme-5/co-designing-community-based-diabetic-services-responsive-to-the-needs-of-children-and-young-people/>

Project video on IHHD site

<https://www.youtube.com/watch?v=oXfQBUacWEU>

NHS England Patient & Public Participation Team identified the Co-designing Community-Based Diabetes services for Children and Young People represents best practice, 2016.

The NIHR Central Commissioning Facility (CCF) identified the Co-designing Community-Based Diabetes services for Children and Young People represents best practice and merit dissemination to other Centres, 2017.

Keep Me Safe in Europe project (KMSE)

The Keep Me Safe in Europe (KMSE) e-learning tool is a collaboration led by Anglia Ruskin University, the University of East London and other organisations including Walsall Council, European University Cyprus and the South-East European Research Centre. It was funded by the European Union's Erasmus+ programme and the game was co-designed and co-produced by groups of young people who have knowledge and experience of the care system and young asylum seekers. The main goal for the tool is to keep young people moving across the continent safely. It provides an engaging, culturally-specific and multi-lingual platform to understand and locate sources of help in new and challenging environments.

Keep Me Safe in Europe is unique in its merging of a videogame game play experience and feel with learning about neglect and abuse. This results in a mediate and curated experience that can reach a wide audience, all in context of a carefully safe guarded digital environment. Keep Me Safe in Europe is also widely accessible from browsers and devices and has specific features to facilitate its usage in classes and for facilitating interactive discussions of the themes presented.

The web site for the game is here: <http://kmse.open-lab.com/>

The game can be played and downloaded from here:

<http://kmse.open-lab.com/play-the-game/> "Keep me Safe" was shortlisted for the Research of the Year Award at the 5th Annual IARS Research and Youth Leadership Awards 2016.

Reducing blindness in India: Global challenge in reducing blindness

The ORNATE India project is funded by RCUK and aims to reduce the risk of visual impairment due to diabetes by developing a diabetic retinopathy care pathway. This project is in collaboration with Moorfield's Hospital Trust, UEL, LSE and Imperial College London in the UK and four major ophthalmology centres in India and the Government of Kerala. The strategy of this UK-India academic programme is to increase research capacity and capability at individuals, institutional and national levels and establish partnerships to address the challenges of decreasing blindness due to Diabetic Retinopathy (DR) through research. We will select a few government centres, private hospitals and well established diabetes and ophthalmology centres to ensure support is provided at all levels.

ESRC international studies for life course research

ESRC International Centre for Life Course Studies in Society and Health (ICLS). This in collaboration with UCL, Imperial College London, Manchester University, and Orebro University, Sweden. Started 2008, the Centre is now in the process of applying for transition funding. Gopal Netuveli's role in the Centre is leading the international perspectives in ageing and wellbeing.

ESRC Cross-investment project on social exclusion with Bangor University and UCL. This project is collaboration between two ESRC funded projects, ICLS and CFAS. GN leads on the influences of the environment on social exclusion in older ages.

<http://www.esrc.ac.uk/research/our-research/international-centre-for-lifecourse-studies-icls/>

Well Communities

Since 2007 IHHD has played a major role in the development, delivery and evaluation of Well Communities (formerly called Well London). This is an innovative framework that enables disadvantaged communities and local organisations to work together to improve health and wellbeing, build community resilience, and reduce inequalities using a community development and co-production approach. This framework approach has been developed over two phases through work with 33 London neighbourhoods, across 20 London boroughs, supported by Big Lottery funding.

Our vision is empowered local communities who have the skills and confidence to take control of and improve their individual and collective health and wellbeing.

Our mission is to develop a robust, evidence-based framework for community action for health and wellbeing that will influence policy and practice to secure real enhancements to wellbeing and reductions in health inequalities across all communities in our capital city and beyond.

Over 35,000 people have participated in Well Communities, which has delivered a wide range of positive outcomes and impacts from improved open spaces to empowered communities with increased knowledge, skills and confidence, and greater capacity for working together to make a positive contribution to their community's health and wellbeing.

A unique feature of Well Communities is the robust research and evaluation that runs alongside each programme to capture its effectiveness and cost effectiveness together with comprehensive implementation support, to ensure the fidelity of, and learning about, the model. This IHHD led research has also involved collaboration with a number of other research institutions, including the London School of Hygiene and Tropical Medicine, and the Centre for Health Service Economics and Organisation at Oxford University.

Supported by the Mayor of London and endorsed by Professor Sir Michael Marmot Well Communities has been recognised nationally and internationally as best practice.

Documentary evidence of the effectiveness of the approach and its very positive impact in Phase 2 is captured in a short film that can be viewed at: vimeo.com/131850258

More information can be found on our website at wellcommunities.org.uk

Dynamic Populations

This research project aimed to improve understanding of the nature of patient 'churn' in Newham and to co-produce improvements that could mitigate its impact on health outcomes and on primary care services. This project aimed to improve understanding of the nature of patient 'churn' in Newham and to co-produce improvements that could mitigate its impact on health outcomes and on primary care services. The research has brought together evidence from a number of complementary sources, including: a literature review; individual and GP Practice level data analysis; insights from patients and staff; and early improvement evaluation with case studies. It has also developed a new set of measures for calculating churn rates in the primary care context, facilitated the co-production of improvement recommendations and scoped the potential for economic impact evaluation.

Social Prescribing

Members of the IHHD team have developed significant expertise in the evaluation of social prescribing with evaluations for Newham, City and Hackney and Waltham Forest CCGs. They also contributed to London-wide and national guidelines on social prescribing (e.g. economic evidence review and social prescribing toolkit) in collaboration with the national social prescribing network of which they are steering group members. Members of IHHD have also delivered evaluation workshops to commissioners and practitioners of social prescribing. The work in City and Hackney has featured in 'The Learning Environment' on the NHS England website, and the team has a number of collaborations with IT companies to develop social prescribing software packages.

The expertise of Dr Marcello Bertotti and Caroline Frostick is recognised nationally through their membership of the steering group of the Social Prescribing Network (SPN) which unites health professionals, researchers, practitioners, commissioners, and citizens to exchange valuable practice and develop social prescribing in the UK. The network was set up in 2016 and now has more than 1,300 members across the UK. Through this network, they have contributed to London-wide and national guidelines on social prescribing (e.g. Healthy London Partnership and NHS England) and have facilitated evaluation workshops specifically aimed at commissioners and social prescribing practitioners. More recently, Bertotti has contributed to consultancy work for NHS England investigating the economic evidence base for social prescribing and the development of a social prescribing toolkit.

<https://youtu.be/PCxRLAM7wBQ>

Post Research Ethics Analysis (PREA) for health research in humanitarian crises

PREA is a research project investigating ethical issues in health research in humanitarian crises. It aims to identify good ethical practice from lessons learned in the field and develop a tool that assists reflection on ethical issues in humanitarian research. The PREA project is firmly based on the assumption that research ethics needs to go beyond ethical approval mechanisms and support ethical practice during and after research projects. The PREA tool will provide researchers and other stakeholders with a pragmatic instrument that assists learning lessons about the actual ethical challenges that develop during health research in humanitarian crises and encourage good practice regarding equitable and meaningful stakeholder involvement from inception right throughout to completion and dissemination of research.

<http://www.preaportal.org/about/>

PROMISE

PROMISE (PROactive Management of Integrated Services and Environments) is a paradigm of co-producing an alternative discourse in mental health care. A discourse that creates hope and agency and empowers patients to take the driving seat in moving towards recovery and life beyond illness. A discourse that empowers staff to 're-innovate the wheel' and continuously improve on the small changes that make a big difference. A discourse in which patients and professionals can empower each other to eliminate reliance on force across the entire recovery journey. PROMISE has been funded and supported by the National Institute of Health Research (NIHR) Collaboration for Leadership in Applied Health Research and Care East of England (CLAHRC EOE) with additional matched-funding from the Cambridgeshire and Peterborough NHS Foundation Trust (CPFT) and the Institute for Health and Human Development at the University of East London.

http://www.promise.global/who_we_are.html





THE TEAM

IHHD staff include sociologists, statisticians, psychologists, clinicians and public health specialists in a vital collaborative and truly multidisciplinary team.

Professor Angela Harden, Director

Angela has led the IHHD team as director since 2014 and is a Professor of Community and Family Health. She is currently leading work on new models of antenatal care, addressing low birth weight and community centred approaches to promoting health and well-being. Angela is also an internationally recognised expert on systematic reviews and evidence synthesis.

Professor Tine Van Bortel, Deputy Director

Tine is Professor of Global & Mental Health and Deputy Director of the IHHD. She has an interdisciplinary background in medical humanities, social sciences and health sciences. Her areas of work are in wider global health, society and sustainability, with specific expertise in public mental health improvement in a local and global context. Her work has been recognised locally, nationally and internationally and gained her mandates with the World Economic Forum, World Health Organisation and Advancing Health Alliance. Tine is also an accredited Professional Therapeutic Coach (integrating counselling, Mindfulness, CBT and coaching), passionate about good mental health and quality of life for all.

Professor Gail Findlay

Gail leads on the Well Communities programme and development of evidenced based health improvement approaches linked to the IHHD research agenda. She is recognised nationally and internationally for her expertise in the field of community development. She was Director of Camden and Islington Health Action Zone and worked for the Health Development Agency and then NICE as Regional Associate Director for London.

Professor Gopal Netuveli

Gopal's background is in natural and clinical sciences with research interests in epidemiology, public health, health services, social epidemiology and social policy. He is a co-investigator on the ESRC International Centre for Lifecourse Studies in Health and Society. His research tends to assume a life course perspective with a focus on healthy ageing and use longitudinal data.

Dr Marcello Bertotti, Senior Research Fellow

Marcello is a board member of The Social Prescribing Network and leads a large-scale evaluation of social prescribing in collaboration with City and Hackney Clinical Commissioning Group and Queen Mary University of London. He also leads research on homelessness and mental health pathways and alternative community currencies (e.g. Time Banks), all of which focus on developing asset-based approaches to health and wellbeing.

Dr Darren Sharpe, Senior Research Fellow

Darren is a Sociologist and Consultant in the public care sector and leads a NIHR North Thames CLHARC study modelling community-based diabetes services for children and young people. He is recognised nationally and internationally for his participatory research with children and young people and has undertaken work on behalf of UK Research Councils, Central Government Departments, and NGOs to support the involvement of patients and the public in service design, research and policy development.

Dr Bethan Hatherall, Research Fellow

Beth is a co-investigator on the REACH Pregnancy Programme and is leading a strand of the research programme which focusses on strengthening women's involvement in planning and improving maternity services. Prior to joining IHHD, Bethan held a research post with the Nuffield Centre for International Health and Development and has also worked in this field internationally for non-governmental organisations in Ghana, Malawi, Eritrea and South Sudan.

Dr Lorna Sweeney, Research Fellow

Lorna is a research fellow on the 'REACH Pregnancy Programme', with a research interest into improving access to antenatal care for pregnant women living in areas with high levels of poverty and high ethnic diversity. She has worked at Barts Hospital and the London School of Medicine and Dentistry, where she co-ordinated the qualitative research arm of the 'HepFree' study, aimed at high-risk immigrant communities.

Dr Anita Mehay, Research Fellow

Anita is a research fellow on the 'REACH Pregnancy Programme' with research interest in health inequalities. She leads on setting up a large randomised controlled trial to evaluate a new group-based antenatal care called 'Pregnancy Circles' which aim to provide a woman-friendly, community environment for antenatal care.

Caroline Frostick, Research Fellow

Caroline is a steering group member of the National Social Prescribing Network (NSPN) and her research interests include the evaluation of alternative treatment pathways for improving mental wellbeing and the promotion of mental health recovery. She has an MA in Counselling and Psychotherapy and has worked as a counsellor in a primary school and with a South London based charity for women experiencing post-natal depression.

Dr Ainul Hanafiah, Research Fellow

Ainul is a psychologist and global mental health expert with specific interests in improving mental health across the life course as well as strengthen mental health policies and systems.

Dr Chiara Lombardo, Research Fellow

Chiara is Chartered Psychologist and holds a PhD in Applied Social Sciences. Chiara has over ten years of experience of research in the field of Public Adult Mental Health. She has recently been working on the PROMISE project (PROMISE.global) aimed at reducing the use of coercion in the acute mental health sector. She has been conducting research in different contexts of mental health and emotional wellbeing, using a wide range of qualitative and participatory approaches. Chiara has worked with service users, carers and professionals from a wide range of health services. At the heart of her interest lies the promotion of good mental health for all, and how the wider organisational culture and context can influence the delivery of safe, effective and compassionate care.

Ruby Farr, Research Assistant

Ruby works on the delivery of the Well Communities Programme with a specific interest in the role of civic engagement in activating health and wellbeing in local residents. Ruby is also undertaking a PHD at IHHD.

Administration team

Michelle Woolley, Senior Administrator

Michelle has worked for the Institute for 10 years. She oversees the financial, HR and grant bidding processes and records for the Institute, maintaining procedures that dovetail with those of the wider University. Trained as an artist with an MA from the RCA, Michelle is a practicing performance artist, singer and morris dancer with experience of teaching art at undergraduate and post-graduate levels. She is also a member of the Association of Research Managers and Administrators.

Austine Karibo, Administrative Officer

Austine is the Administrative Officer (Health & Safety Officer/Diary Manager) responsible for the day-to-day running of the institute administratively. A member of the University of East London, Environmental Sustainability Board, and an EMS Internal auditor. Skilled in facilitating Sexual Health training with a background in community engagement.

Current PhD students

Emma Green

'An exploration of an asset-based approach to the management of diabetes in young people: a qualitative participatory approach'

Ifeoma Dan-Ogosi

Participatory budgeting approaches to improving health and wellbeing: a mixed methods evaluation

Laila Surani

Quality of life in older people in Sindh province, Pakistan

Ruby Farr

The Public Health significance of Civic Engagement among Young Adults: A Life Course Perspective

Cathryn Salisbury

Promoting a healthy start: Engaging communities to co-design pre and post-natal interventions

Michaela Otis

Developing a health care system evaluation model for developing and transitional economies based on human development

Theeba Krishnamoorthy

Healthy Relationships and Sexual Health Education in Sri Lanka

Natalie Creary

Physical Activity, Health and well-being: Understanding processes and challenges for physical activity for health of ethnic minority families living in global neighborhoods.

Hena Wali Haque

Factors influencing women's and families access to maternity-related health services through early years settings: a mixed methods study in an ethnically diverse urban setting in the UK

100%

Rate of timely completed PhDs with no dropouts or withdrawals.

“UEL PhD, MSc and undergraduate students, as well as Public Health Registrars, have been trained in IHHD as researchers, interns and volunteers”.

IHHD PUBLICATIONS

Since its inception in 2006 to date there are 113 publications in which author affiliation included IHHD. During this period, these publications were cited 1890 times, an average of 172 citations per year. IHHD h-index is 21, suggesting we have at least 21 publications cited at least 21 times.

Selected IHHD Publications 2016-18

- Sharpe, D.M., 2018. "Pork pies and vindaloos": learning for cosmopolitan citizenship. *Educational Review*, 70(1), pp.41-50.
- Sawtell, M., Sweeney, L., Wiggins, M., Salisbury, C., Eldridge, S., Greenberg, L., Hunter, R., Kaur, I., McCourt, C., Hatherall, B. and Findlay, G., 2018. Evaluation of community-level interventions to increase early initiation of antenatal care in pregnancy: protocol for the Community REACH study, a cluster randomised controlled trial with integrated process and economic evaluations. *Trials*, 19(1), p.163.
- Anjara S., Nellums L., Bonetto C., and Van Bortel T. 2017. 'Stress, health and quality of life of female migrant domestic workers in Singapore: a cross-sectional survey', *BMC Women's Health*, 2017, 17:98.
- Wilson, C. and Sharpe, D., 2017. Promoting young people's mental health and well-being through participation in the arts: A mixed-methods service evaluation of the Zinc Arts ArtZone programme. *Journal of Applied Arts & Health*, 8(1), pp.39-55.
- Bertotti, M., Dan-Ogosi, I.E. and Rao, M., 2017. Workplace well-being in the London-Chinese business community. *International Journal of Workplace Health Management*, 10(2), pp.86-100.
- Findlay, G. Tobi, P. (2017) Well Communities, In Practice: Perspectives in Public Health. 137 (1), pp. 17-20• Kristiansen, M., Dhama, S., Netuveli, G., Halken, S., Muraro, A., Roberts, G., LarenasLinnemann, D., Calderón, M.A., Penagos, M., Du Toit, G. and Anotegui, I.J., 2017. Allergen immunotherapy for the prevention of allergy: A systematic review and metaanalysis. *Pediatric Allergy and Immunology*, 28(1), pp.18-29.
- Frostick, C., Watts, P., Netuveli, G., Renton, A. and Moore, D., 2017. Well London: Results of a Community Engagement Approach to Improving Health Among Adolescents from Areas of Deprivation in London. *Journal of Community Practice*, 25(2), pp.235-252.
- Mudrarabikwa, O., Tobi, P. and Regmi, K., 2017. Public-private partnerships to improve primary healthcare surgeries: clarifying assumptions about the role of private provider activities. *Primary health care research & development*, 18(4), pp.366-375.
- Tobi, P., Kemp, P. and Schmidt, E., 2017. Cohort differences in exercise adherence among primary care patients referred for mental health versus physical health conditions. *Primary health care research & development*, 18(5), pp.463-471.
- Bagnall, A., Kinsella, K., Trigwell, J., South, J., Sheridan, K. and Harden, A., 2016. National Institute for Health and Care Excellence Primary Research Report 1: Community engagement-approaches to improve health: map of current practice based on a case study approach.
- Bonell, C., Harden, A., Fletcher, A. and Viner, R., 2016. In memoriam: the contributions to public health research of Farah Jamal, BA, MSc, PhD. *J Epidemiol Community Health*, 70(4), pp.329-330.
- Henn, M. and Sharpe, D., 2016. Young people in a changing Europe: British youth and Brexit 2016.

- Sharpe, D. and Henn, M., 2016. UK young voters are not anti EU but just don't understand it. E! Sharp.
- Cable, N., Chandola, T., Aida, J., Sekine, M. and Netuveli, G., 2017. Can sleep disturbance influence changes in mental health status? Longitudinal research evidence from ageing studies in England and Japan. *Sleep medicine*, 30, pp.216-221.
- Hatherall, B., Morris, J., Jamal, F., Sweeney, L., Wiggins, M., Kaur, I., Renton, A. and Harden, A., 2016. Timing of the initiation of antenatal care: an exploratory qualitative study of women and service providers in East London. *Midwifery*, 36, pp.1-7.
- Madathil, S.A., Rousseau, M.C., Wynant, W., Schlecht, N.F., Netuveli, G., Franco, E.L. and Nicolau, B., 2016. Nonlinear association between betel quid chewing and oral cancer: Implications for prevention. *Oral oncology*, 60, pp.25-31.
- Pinkney, J., Rance, S., Benger, J., Brant, H., Joel-Edgar, S., Swancutt, D., Westlake, D., Pearson, M., Thomas, D., Holme, I. and Endacott, R., 2016. How can frontline expertise and new models of care best contribute to safely reducing avoidable acute admissions? A mixed-methods study of four acute hospitals.
- McCourt, C., Rayment, J., Rance, S. and Sandall, J., 2016. Place of birth and concepts of wellbeing: an analysis from two ethnographic studies of midwifery units in England. *Anthropology in Action*, 23(3), pp.17-29.
- Rao, M., Singh, P.V., Katyal, A., Samarth, A., Bergkvist, S., Renton, A. and Netuveli, G., 2016. Has the Rajiv Aarogyasri Community Health Insurance Scheme of Andhra Pradesh Addressed the Educational Divide in Accessing Health Care?. *PloS one*, 11(1), p.e0145707.
- Rozée, V., Rance, S. and Mulder, S.S., 2016. Causas públicas, historias privadas: los derechos reproductivos y el aborto en Bolivia. *Bulletin de l'Institut français d'études andines*, (45 (3)), pp.389-406.
- Green, E., 2016. An exploration of an asset based approach to the management of diabetes in young people: a qualitative participatory approach. peer reviewed book of proceedings, p.28.
- Tobi P (2016). Health needs assessment. In: Regmi, K. and Gee, I. eds., *Public Health Intelligence: Issues of Measure and Method*. Springer.
- Törrönen, M. and Sharpe, D., 2016. Nuorten osallistuminen sosiaalityön tutkimukseen. Teoksessa Maritta Törrönen, Kaija Hänninen, Päivi Jouttimäki, Tiina Lehto-Lundén, Petra Salovaara & Minna Veistilä (toim.): *Vastavuoroinen sosiaalityö*. Gaudeamus. Helsinki, pp.278-290.
- Van Bortel, T., et al. 2016. 'Beyond the virus: The psychosocial impacts of an Ebola outbreak on affected individuals and communities – policy and practice', *Bulletin of the World Health Organization*,
- Van Bortel, T. 2016. 'Mentally Healthy Workplaces: how to build a mentally healthy workplace', *World Economic Forum Online Publications*.
- Brouwers EPM, Mathijssen J, Van Bortel T, et al. 2016 Discrimination in the workplace, reported by people with major depressive disorder: a cross-sectional study in 35 countries, *BMJ Open*.
- Lee C., Haggith A., ... and Van Bortel, T. 2016. 'Older prisoners with complex care needs and the Care Act 2014: An examination of policy, practice and models of social care delivery', *Prison Services Journal*, March 2016, No 224.
- Hanafiah, A. and Van Bortel, T. 2015. 'Stigma and discrimination of people with mental health problems in Malaysia: a qualitative exploration of from the perspective of mental health professionals', *International Journal of Mental Health Systems*, 2015, 9:10.
- Lasalvia, A., Van Bortel, T., et al. 2015. 'Cross-national variations in reported discrimination among people with major depression worldwide: the ASPEN/INDIGO international study', *British Journal of Psychiatry*, 2015, 207:6.
- Siriwardhana, C., Wickramige, K., Van Bortel, T. 2015. 'Impact of economic labour migration: a qualitative exploration of left-behind family member perspectives in Sri Lanka', *J Immigrant Minority Health* (2015) 17: 885.

University of East London

Stratford Campus
Water Lane
London
E15 4LZ
United Kingdom

Email: ihhdinfo@uel.ac.uk

Twitter: @IHHD

Travel information

The Stratford campus is a short walk from the Stratford and Stratford International rail stations. It's also served by the Jubilee and Central Underground lines, the DLR, and a busy bus station. Bus routes calling at Stratford station include: the 25, 69, 86, 104, 108, 158, 238, 241, 257, 262, 276, 308, 425, and the D8.

By road, the campus is accessible via the A12, A13 roads, and the A406 London circular.

www.uel.ac.uk/ihhd