

MENTAL HEALTH RESEARCH INSIGHTS

University of Essex
Mental Health
Research Report
2021-2024



MiSoC
ESRC
Research Centre on
Micro-Social Change



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TRANSFORMING APPROACHES TO PSYCHOLOGICAL DISTRESS

At the University of Essex, our mental health researchers work in various departments across all areas of study, contributing to our unique multi-disciplinary approach to mental health.

Our research employs a wide range of theories, approaches and methods to tackle important questions about mental health both in the UK and around the world. We have experts from diverse fields such as psychology, sociology, economics, epidemiology, statistics, law, sports science, creative arts, therapy, philosophy and political science driving our research forward.

Our mental health research benefits from a number of unique strengths at the University of Essex including the [UK Longitudinal Household Survey \(*Understanding Society*\)](#) hosted by our [Institute for Social and Economic Research](#); the [ESRC Research Centre on Micro-Social Change](#); our strong relationships with international organisations including the [UN Human Rights Council](#); our pioneering work in [green exercise](#); our thriving training programmes in [clinical psychology](#) and related [therapy disciplines](#); our commitment to [citizen participation](#); and our unique interdisciplinary approaches combining clinical and academic disciplines led by internationally recognised experts.

Our mental health research is transformative; challenges conventional thinking; and creates positive change in society. We are actively researching mental health across five main themes:

- **Health inequalities and social determinants of mental health**
- **Stress, trauma and resilience**
- **Psychosocial approaches and rights-based mental health care**
- **Inclusive involvement, participation and voice**
- **Social prescribing, green care and exercise**



HEALTH INEQUALITIES AND SOCIAL DETERMINANTS OF MENTAL HEALTH

An unrivalled resource for inequalities research at Essex

The [Understanding Society](#) study (*Understanding Society: the United Kingdom Household Longitudinal Study*), which began in 2009, is conducted by the [Institute for Social and Economic Research](#), at the University of Essex. Understanding Society interviews around 40,000 households every year, with a focus on family and community behaviour, and helps researchers explore inequalities and how these may be changing over time. Inclusivity is built into the foundation of *Understanding Society*.

“Understanding Society asks questions to everyone in a household and being able to look at the different life experiences people have over time is one of the greatest strengths of the study.” [Prof Meena Kumari](#), Director of the Institute for Social and Economic Research and topic champion for health in *Understanding Society*

Using this dataset, our researchers have examined inequalities in mental health across a range of social and economic factors. Our NIHR East of England Applied Research Consortium mental health research team, led by [Prof Susan McPherson](#), in collaboration with local and regional stakeholders, has been examining [inequalities in undiagnosed mental health in the community across protected characteristics](#) as defined by the UK Equality Act. Emerging findings from this work show that while women, younger people, single people and ethnic minorities do face disadvantages in accessing diagnosis and care, the greatest disadvantages are faced by sexual minorities and people living with a disability.

Analysis of the dataset by [Dr Ben Etheridge](#) also examines disadvantages faced by women whose mental health deteriorated more than men's during the pandemic. The analysis shows the key role of loneliness in this growing gender-gap and highlights that [younger women are at a particular disadvantage](#).

The pandemic accelerated a mental health crisis in young people

In the UK, trends in mental health show a growing crisis among young people which has been accelerated by the pandemic. Analysis of *Understanding Society* by [Prof Alita Nandi](#) shows that the deteriorating mental health in 16 to 24 year-olds is particularly severe for [unemployed or part-time White British young people living in deprived areas](#). Among 5 to 8 year-olds, analysis by [Prof Michaela Benzeval](#) shows that the pandemic levelled out some prior inequalities in mental health whereby children of educated, employed parents with higher income showed deterioration in mental health. However, [White British boys living in deprived areas](#) continued

to have the poorest mental health and deteriorated most during the pandemic. [Dr Emily Murray](#), Director of our new [Centre for Coastal Communities](#) is currently working on analysis of *Understanding Society* to show that living in a deprived coastal community also has a more detrimental impact on mental health of teenagers than living in a deprived inland area. Dr Murray is continuing to examine reasons for this through a new [PhD studentship](#).

To capture some of the difficulties young people faced during the pandemic, University of Essex film maker [Nic Blower](#) co-created a [moving documentary using video diaries](#) that gave voice to teenagers navigating the pandemic during school closures. It highlighted the healing benefits of talking about the challenges teenagers faced and the uncertainty generated by the pandemic.

“Having a camera, and walking around, being able to record whatever I wanted. Now that is, it's amazing... you're having a conversation with yourself, but you on the other side isn't saying anything back, it's just sitting there listening.”

Given the growing crisis in young people's mental health, there is a widespread view that social media use has some role in this. [Dr Cara Booker](#) has used the *Understanding Society* dataset to investigate this possible link and continues to research in this area to attempt to understand what types of social media in young people use may be harmful or beneficial, as the relationship is not straightforward. One often assumed mechanism is that more time using social media may come at the cost of physical activity which has known benefits for mental health. Research by psychologist [Dr Nick Cooper](#) has shown this not to be the case. The research confirmed an association between sports participation and mental wellbeing but found [no evidence that children were replacing recreational activities with screen use](#). The research concluded that rather than recommending children have limited screen time, we need to consider other barriers to sports participation in order to generate policies to improve children's mental wellbeing. [Dr Ayten Bilgin](#) is also currently researching in this area, examining whether early screen media exposure is linked to infant problems with crying, sleeping or feeding as well as childhood emotional and behavioural difficulties.

Disadvantages faced by ethnic and religious minorities

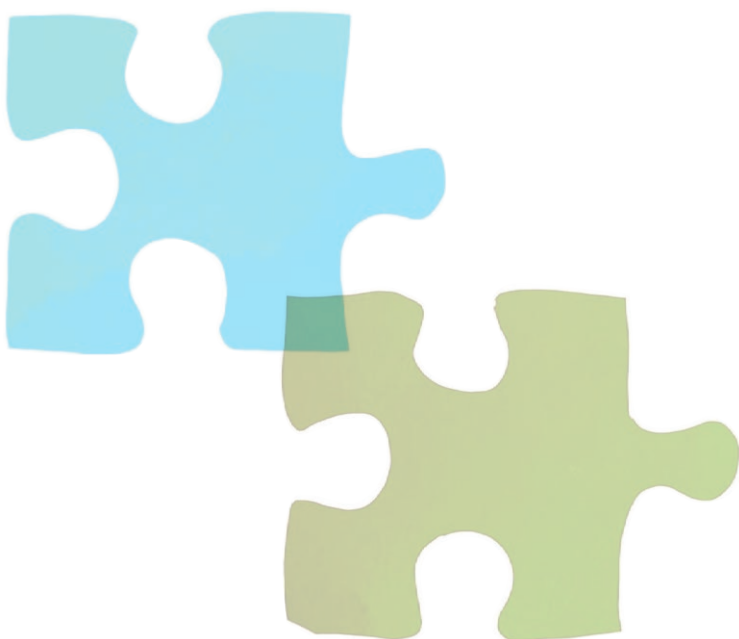
Although population level data from *Understanding Society* shows that White British people tend to have poorer mental health, some ethnic minority groups are nevertheless over-represented in mental health services for severe mental illness including inpatient wards. Our researchers have explored this phenomenon using qualitative methods which enable a more

in-depth understanding of individual experience. Our research shows that people from a [Black ethnic background detained in inpatient care](#) experience high levels of racism while receiving care as well as feeling stigmatized within their own ethnic communities. Similarly, our research shows that [people from a South Asian background](#) with psychosis experience stigma from the public, from within their own communities and in NHS services for psychosis which fail to consider patient experiences in the context of their cultural and religious backgrounds.

Analysis of *Understanding Society* by [Prof Alita Nandi](#) also shows that people from [religious minorities](#) (including Pakistani and Bangladeshi Muslims) tend to have poor wellbeing compared to people with no religious affiliation. This could be connected to the intersection of belonging to a minority religion and being from a minority ethnic background. However, people who frequently attended religious services were more likely to have better wellbeing irrespective of religious affiliation suggesting attending religious or secular services can be beneficial for mental wellbeing.

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STRESS, TRAUMA AND RESILIENCE

Childhood trauma and mental health

Our Stress, Trauma and Resilience research group is led by [Dr Megan Klabunde](#) in the Department of Psychology. Dr Klabunde's research examines how children and young people process information inside their bodies and how childhood trauma can influence this, with consequences for mental wellbeing. Her research uses state of the art facilities in our [Centre for Brain Science](#) to study the developing structure and function of the brain. Led by Dr Klabunde, The [world's largest brain study of childhood trauma](#) has revealed how [trauma affects development and rewires neural pathways](#). It is hoped the research will help hone new treatments for children who have endured mistreatment.

Working with [Dr Helge Gillmeister](#) along with stakeholders Healthwatch Essex, the POWER project, Essex Family Forum, Essex Multi-Schools Council, HCRG Healthy Schools Programme, Affinity Vanguard Service, Tendring Families First and Trauma Informed Schools UK, Dr Klabunde is continuing to investigate the impact of childhood trauma on mental health over the long-term using a battery of physiological tests, questionnaires, interviews and measurements of brain activity with 9-13 year olds. Dr Gilmeister's research has also generated advanced electroencephalogram (brain activity scanning) techniques for [identifying depersonalisation disorders](#), which tend to result from childhood trauma.

Working with an interdisciplinary team of biologists, epidemiologists and psychologists, [Anna Dearman](#) is examining gene-environment interactions during childhood in order to understand how genetic and biological factors interact with traumatic events, leading to poor mental health and resilience. Also examining mechanisms to explain the link between childhood trauma and mental health, [Dr Antonella Trotta](#) has examined data from the Environmental Risk Longitudinal Twin Study to show how [cognitive ability at age 12 can partly account for a link between childhood adversity and teenage psychotic experiences](#), meaning that interventions to support cognitive development in at risk groups could help prevent the development of psychosis.

[Dr Danny Taggart](#) in the School of Health and Social Care is actively researching the impact of childhood trauma to identify ways that NHS mental health services can better support adults disclosing historic child abuse and how other public sector services can develop trauma-informed care to better support their clients. For example, Dr Taggart's research has examined how [child sexual abuse survivors experience dental care](#) and recommended ways that dental staff can implement trauma-informed collaborative approaches to avoid re-traumatisation of their patients. Dr Taggart's research is also informing frontline social care

services [by informing training in trauma-informed care for key workers](#). A recent book co-edited by Prof Susan McPherson investigates a range of [psychological impacts of attending boarding school](#) and includes a chapter by Dr Taggart using data from the [Independent Inquiry into Child Sexual Abuse](#) to examine the impact of historic child abuse in a boarding school setting.

Violence against women and girls: a global mental health crisis

Intimate partner violence is the most common form of violence worldwide and predominantly affects women and girls. Our research highlighted how social isolation, financial stress and increased alcohol intake during the pandemic [contributed to increases in reports of domestic violence](#) with implications for mental health. In 2022, [Dr Danny Taggart](#) contributed to the [Lancet Psychiatry Commission on intimate partner violence and mental health](#). This exhaustive evidence review highlighted the ways in which intimate partner violence impacts on mental health and vice versa. The report highlighted the important role of schools, mental health services and better co-ordination across sectors to try to tackle this global crisis.

Gendered violence can be a particular risk faced by migrants in precarious situations such as fleeing persecution, being internally displaced, with insecure work and housing conditions. [New research led by Prof Anuj Kapilashrami](#) funded by the National Institute for Health and Care Research in collaboration with global partners will examine gendered violence and poor mental health of migrants experiencing these challenging situations and develop responsive interventions to address their needs.

The mental health impact of the pandemic

“Following the Covid pandemic, there is an even greater need for data about the experiences of the whole population. The *Understanding Society* COVID-19 survey allows researchers to explore how the pandemic impacted individuals, families and communities across the UK through our large and representative sample of the UK population.” Prof Michaela Benzeval, Director of *Understanding Society*

With data collection stretching back decades prior to the COVID-19 pandemic, Understanding Society was in a unique position to track the impact of the pandemic from a pre-COVID baseline. A [COVID-19 survey](#) was initiated in April 2020 which collected monthly data from the main *Understanding Society* sample. Our researchers were able to



make use of *Understanding Society* data to provide unique insights into the mental health impacts of COVID-19. [Dr Laura Fumagalli](#) and [Prof Birgitta Rabe](#) analysed the dataset to show that UK school closures [severely affected the mental health of mothers with children aged 4-12](#); but that their mental health tended to recover as children began to return to school. They also found that [children's mental health and behavioural problems deteriorated during school closures](#) and that their mental health did improve slightly but did not bounce back once schools opened again.

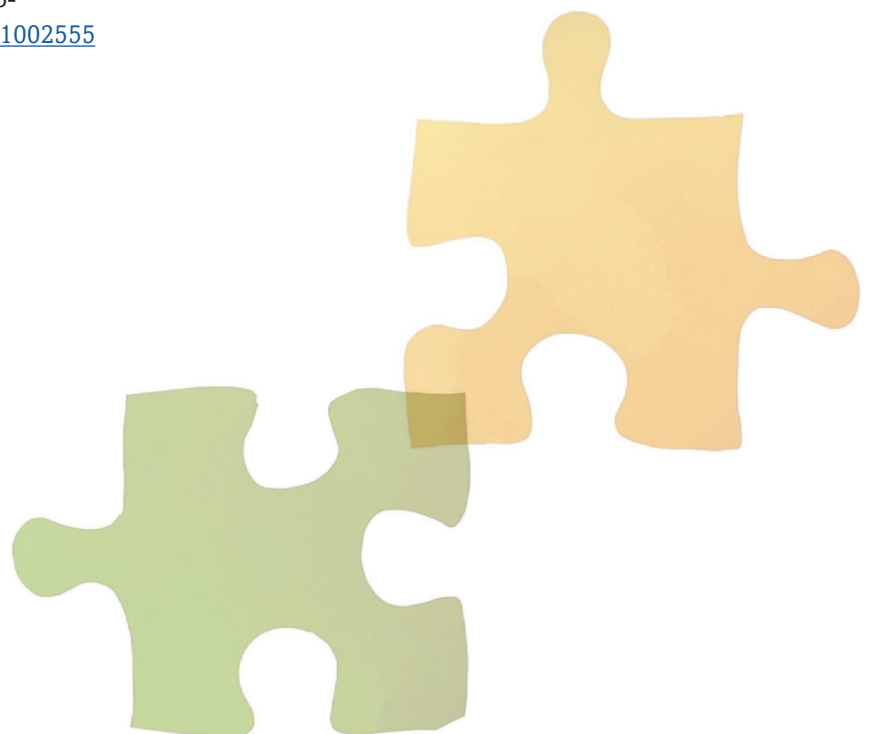
Our analyses of the COVID-19 dataset also helped establish that the UK lockdown led to [deterioration of mental health for adults](#), particularly for women and young adults; that about [30% of previously healthy adults had developed clinical levels of psychological distress by April 2020](#) but that this “psychological shock” reduced gradually over the following months. People [looking after another member of their household](#) (especially those caring for a child or someone with learning disability) experienced particular stress during lockdown with their mental health deteriorating more than non-carers. People who [reported COVID-19 symptoms](#) experienced increases in psychological symptoms for up to seven months after the reported infection. Contrary to popular belief, poor weather did not lead to any worsening of mental health during the lockdown, [but restricted access to parks irrespective of weather conditions](#) did lead to worse mental health.

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PSYCHOSOCIAL APPROACHES AND RIGHTS-BASED MENTAL HEALTH CARE

Championing rights-based approaches to mental health

Between 2014 and 2020, the UN special rapporteur on the right to health was psychiatrist Professor Dainius Puras, who became a visiting Professor at the University of Essex in 2015. His work investigating human rights in mental health care across the world was supported by a Senior Advisor, [Julie Hannah](#), Lecturer in the School of Law. In collaboration with Julie, who provided research support, Dr Puras published a number of [groundbreaking reports](#) to the UN Human Rights Council calling for a radical change in the practice and organisation of mental health care across the world. The reports called for a challenge to the dominance of biomedicine in mental health care; for power asymmetries to be addressed; and for systematic bias in the mental health evidence base (including conflicts of interest) to be acknowledged and addressed. Above all, the work highlighted the need for a much broader application of psychosocial approaches across the world in order to better support people experiencing mental distress. Subsequently, Julie co-founded the [Centre for Mental Health, Human Rights, and Social Justice](#), a ‘multi-disciplinary global community of scholars and activists dedicated to the study of right-based approaches to mental health law, policy and practices’.

Puras’ work stimulated considerable activism in the field with many professional and survivor organisations joining the call for a greater emphasis on the psychosocial environment and the need to transform mental health systems worldwide to ensure they comply with human rights legislation. The work also triggered responses from psychiatric organisations defending their role in mental health care and evidence generation. These responses were analysed by [Prof Susan McPherson](#), along with Dr Jeppe Oute, honorary Lecturer in the School of Health and Social Care. McPherson and Oute’s analysis illustrates how [psychiatric organisations attempted to undermine the special rapporteur](#) and his detailed country-based inspections which led to his call for a radical change towards rights-based care in mental health. Their work was featured by [Mad in America](#), a widely read blogsite which serves as a ‘catalyst for rethinking psychiatric care in the United States and abroad’. In spite of the resistance, the push for radical change has gained momentum with the World Health Organisation joining the call in 2023 for a [rethink of mental health systems](#).

Philosopher [Prof Wayne Martin](#) has conducted pioneering research on mental capacity, which determines a person’s legal right to refuse unwanted treatments. University of Essex research in this field has played a significant role in informing and shaping public policy and practice including influencing the [2018 Independent Review of the Mental Health Act](#). This

research continues to inform the ongoing global reform of mental health and mental capacity legislation and the effort to embed respect for patient autonomy and human rights within care practices including a [recent analysis of compulsory treatment orders in Scotland](#).

Driving forward psychosocial interventions

As well as University of Essex being at the heart of this call for radical changes to global mental healthcare towards human rights-based psychosocial approaches, we also have leading experts in psychosocial theory, psychotherapy practice and outcomes research as well as experts researching the psychosocial correlates of mental distress including family systems and social contexts. Our research challenges the current psychiatric evidence base, questioning the methods and assumptions including the underlying problems with the way [mental distress is typically measured](#).

Challenging assumptions about the efficacy of biomedical treatments, Prof Susan McPherson has examined [patient experiences of a wide range of psychological treatments for depression](#), showing that patients need to be more involved in discussions and decisions about therapy and that therapy needs to be more tailored to individual needs, taking into account social and cultural contexts. She has also shown how in couples, relationship difficulties can be intertwined with experiences of depression, meaning that [couples therapy can be a helpful approach](#). Furthermore, for people with persistent depression, psychological therapies like mindfulness-based cognitive therapy, interpersonal therapy and psychoanalytic psychotherapy can have [important benefits for quality-of-life](#), which is often more important to patients than improvements on the symptom checklists typically used in biomedical research to decide if a treatment is beneficial or not.

Mental health is about the social world we live in

Our research shows that mental distress needs to be seen in a wider context of families, schools and society rather than being seen as an individual issue. [Dr Ebenezer Cudjoe](#) has shown how children whose [parent has mental distress](#) worry about their parent when at school while also needing the space school provides to be away from the pressure of caring for their parent. Prof McPherson’s research shows that [depression can complicate family life](#); that the NHS requirement for ‘carer involvement’ in mental health care is naïve to this complexity and that psychosocial family or couple interventions may often be more appropriate in these instances.

Research using representative UK household survey data, [Understanding Society](#), also shows the importance of families.

For example, [Dr Edith Aguirre](#) and [Prof Michael Benzeval](#) found that children have [fewer emotional and peer relationship problems](#) when their mothers have more egalitarian gender role attitudes. They are now working with psychologist [Dr Ayten Bilgin](#) using the same dataset to establish whether parental mental distress before pregnancy might be causing infant difficulties such as excessive crying, sleeping or feeding difficulties. Analysis of Understanding Society by [Prof Emily Grundy](#) has also shown that when young people struggle financially when living independently from their parents, [moving back in with their parents can boost their mental health](#).

Delivering a psychosocial workforce for the future

Alongside our training programme in clinical psychology, our [Department of Psychosocial and Psychoanalytic Studies](#) is leading the way in training psychosocial practitioners who can deliver this much needed shift in approaches to evidence based mental health care. Training in psychological therapies and psychosocial practice is informed by our world-leading research in psychosocial theory. For example, [Prof Renos Papadopoulos](#), a systemic psychotherapist, has pioneered psychosocial interventions for refugee populations and developed a [unique evidence based model of trauma-informed care](#) to promote 'adversity activated development'. [Prof Sue Kegerris](#), a psychoanalytic psychotherapist whose research on [remote psychotherapy](#) has shown how practicing psychotherapists were able to adapt their practices to remote working, triggered by necessity during the pandemic.

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INCLUSIVE INVOLVEMENT, PARTICIPATION AND VOICE

Championing citizen participation in mental health research

We have a strong tradition of participation and involvement in mental health at the University of Essex having appointed [Prof Peter Beresford](#) as Chair in Citizen participation in 2016, remaining now as Emeritus Professor in the School of Health and Social Care. Prof Beresford is a leading international pioneer in [Mad Studies](#) which is a relatively recently established field of research which centres activism, lived experience and user-led research in mental health.

In this tradition, we have strong collaborations with user-led organisations such as [Shaping Our Lives](#) and have several active experts by experience working with our researchers in various ways. [Prof Ewen Speed](#) is a core member of the NIHR East of England Applied Research Consortium theme on [Inclusive Involvement in Research for Practice Led Health and Social Care](#) and is leading a project enabling [Gypsy, Roma and travelling families to co-produce research priorities](#) and identify ways to reduce barriers to accessing physical and mental health care. Alongside this work, in 2022 we established a mental health research stakeholder group to support our [NIHR East of England Applied Research Consortium](#) mental health inequalities project. The stakeholder group includes six experts by experience who have been part of the planning and design of our research from the outset and have formed a Patient and Public Involvement Advisory Group involved in planning our dissemination work and consulting on the design and content of this report.

Giving victims of child sexual abuse a voice to be heard

In the wake of the Saville scandal, an [Independent Inquiry into Child Sexual Abuse](#) for England and Wales took place from 2015-2022. [Dr Danny Taggart](#) in the School of Health and Social Care played a key role in the inquiry, offering victims of child sexual abuse the chance to [share their experiences and be heard with respect](#). Dr Taggart's role involved helping to ensure adult survivors of childhood sexual abuse were supported to provide their testimony directly to the [Truth Project](#), in a way which acknowledged the trauma they suffered and minimised causing further harm.

Over 6,000 people shared their experiences in the Truth Project, making this the largest example of public participation in an inquiry in UK history. Participants shared details about the abuse they suffered, the impact this had on them and the recommendations for change they would like to see in the future.

“The people who came to the Truth Project came from all walks of life and are ordinary people who had also suffered an unusually damaging crime or series of crimes. Many of these survivors had been let down in the past when they tried to tell those in authority about their abuse and had been ignored. The Truth Project offered a different type of opportunity to be finally heard, believed, have their experiences taken seriously and also to make an important contribution to a public inquiry that will lead to social changes.” Dr Danny Taggart

Dr Taggart's subsequent research evaluating the Truth Project has shown survivors need evidence based, trauma-informed support to [participate safely in non-recent abuse inquiries](#) and that survivors need to be involved in the design of public inquiry processes in order to ensure this is done [effectively and safely](#). Follow-up consultation with the Inquiry's Victims and Survivors panel led to [51 recommendations](#) for how public inquiries can maximise benefits and minimise harms of engaging experts by experience. Dr Taggart is continuing work in this field including work with the UK Victims Commissioner on engaging survivors in lived experience panels. With Dr Susanna Alyce, he is also working on operationalising ways in which child sexual abuse survivors can [take part safely in research](#) within a lived experience paradigm.

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SOCIAL PRESCRIBING, GREEN CARE AND EXERCISE

Mental health benefits of physical activity

A growing body of research has been showing the [benefits of physical activity, access to nature and outdoor activity for mental health](#) with much of this research [having used our Understanding Society dataset](#) owing to its representative UK sample and longitudinal household data capture. Our researchers have been driving forward this field generating important findings to inform community approaches to preventing mental ill health and promoting mental wellbeing. Along with a team of sports scientists and psychologists, [Dr Claire Wicks](#) has re-analysed research findings on the psychological benefits of physical activity to show that [exercise in natural environments is more beneficial than exercise in outdoor urban environments](#). Research during COVID-19 lockdown in the UK by [Dr Carly Wood](#) found that [mental wellbeing was worse for people who did very little physical activity during lockdown](#) and to whom physical activity had become less important than before lockdown.

In spite of the known benefits for mental wellbeing, physical activity and sport is not always accessible to all groups in society and people with experience of mental distress may be particularly vulnerable to exclusion and discrimination which prevent them taking part. Along with a team of occupational therapists and medical sociologists, [Dr Anna Pettican's](#) research uses participatory approaches to explore [how marginalised groups experience taking part in a community-based football league](#) and how they face stigma and exclusion in their efforts to engage in physical activity. The research has important implications for how [occupational therapists might support people with mental distress to be more active](#) by ensuring they recognise and address any social barriers preventing people taking part in the activities.

While research suggests physical activity is linked to positive mental wellbeing, we also know that some mental health conditions are associated with inactivity or lack of movement. To better understand the role of movement associated with psychological distress, biomechanist [Dr Aleksandra Birn-Jeffery](#), supported by MQ Wellcome funding, will be leading an investigation of the lived experience of people who experience depression and or anxiety in terms of movement and motor functioning. This will inform a biomechanical investigation of the objective differences and changes in movement of those with and without diagnosed anxiety or depression and how this might change over the course of treatment.

Nature-based interventions can improve mental wellbeing

We have particular expertise in researching the effectiveness of nature-based interventions including those which aim

to improve mental wellbeing. [iCARP](#) is an angling-based programme developed in Essex to support military veterans experiencing trauma symptoms, depression and anxiety. Participants are taken on group fishing trips which include opportunities to open up and talk about their experiences alongside therapeutic support. The research team, led by [Dr Nick Cooper](#), has undertaken pilot research pointing towards short and long-term benefits. The team are now working with funding from the [National Institute for Health and Care Research to undertake a more formal evaluation of treatment effects and extending the intervention to other emergency and front line personnel](#).

Another form of nature-based intervention is 'therapeutic gardening' which is a kind of 'green social prescription' focused on using garden space and gardening activities to improve mental health, build social skills, and develop confidence alongside qualified therapists providing therapeutic support. Research into this programme by Dr Carly Wood found [that people with poor mental health taking part in the programme benefitted](#) and showed improved mental wellbeing even during the pandemic when the mental health of the general population was deteriorating. Their research also helped explain how this kind of intervention can help, showing that the [intervention provided hope, facilitated social relationships and engaged people in nature](#), all of which positively impacted on mental wellbeing.

Social prescribing: mental health benefits of social activities and community participation

[Social prescribing](#) is a growing component of healthcare systems in the UK and elsewhere. The approach involves prescribing community-based activities rather than medical treatments. Activities might include community groups or services which are selected based on individual preferences and interests and which are most likely to engage the individual in a way which improves their health and wellbeing. Research by political scientist [Prof Gina Reinhardt](#) shows [that social prescribing can play a key role in addressing the growing problem of loneliness](#) which is known to have strong negative associations with mental wellbeing. In partnership with English and French local authorities and funded by the European Regional Development Fund, Prof Reinhardt led an international [evaluation of a major social prescribing scheme 'Connected Communities'](#), a social prescribing programme for older people.

Given that social prescribing is a relatively new field of healthcare practice and research, Prof Reinhardt's team have also highlighted the [need for research programmes to become more precise in defining and measuring outcomes](#) in order

to enable comparison of outcomes across different social prescribing programmes.

Drumming is an example of an activity that can have a number of health benefits including improving mental and cognitive wellbeing for people who are neurodiverse. Dr Ruth Lowry has worked with a diverse range of scholars and practitioners establishing an evidence base on outcomes and mechanisms of [drumming for health](#). Dr Lowry's research was featured at the Royal Society Summer science exhibition 2023 and has shown, for example, [that learning to drum can improve behaviour and brain function in autistic teenagers](#); and can enhance motor and psychological skills in children with emotional and behavioural difficulties.

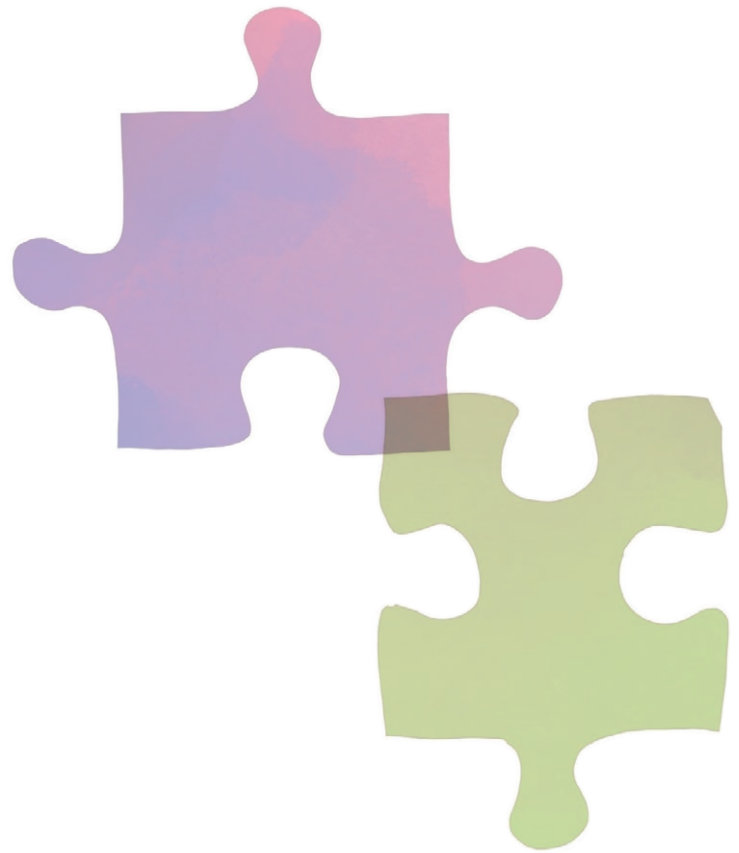
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