

Sharon Fellowship Int Final

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I'm Sharon Cox. I'm a Principal Research Fellow in the department of behavioural science and health. And I'm within the UCLA tobacco and alcohol research group. And I'm in this group, because my work primarily focuses on alcohol and tobacco use, but I do have an interest in other substance use as well. I would say that you could consider me an expert in health inequalities and the role that health inequalities plays within both people starting to use substances, and also why certain populations are much more likely to continue using substances and find it harder to quit because of their broader lived circumstances. So I went for the fellowship, because my work is focused on groups that are underrepresented. So mostly, I work with people who who are experiencing homelessness in its broadest category, so not just people who sleep outside, which is what people think of when they think of homelessness, but people that are sofa surfing people that are between accommodation, people that are at risk of homelessness. And this group is overlooked in so many ways, and not only in health services, but actually in research. But there's such an important group and homelessness is actually growing in the UK. And there's so much more that we could do. But before we can do the research, we need to highlight the research that's already happening. And that includes my own research. So my research is around helping people who are homeless to quit smoking. And that's I guess, you could say that's not a very sexy area of research. But nonetheless, it's really important, because one of the reasons that people who are homeless have such poor health outcomes is because the very high rates of smoking within this group. So I was interested in understanding how I could shine, if you like a metaphoric light on the research that I'm doing. And think about the not only impact, but the pathway to impact and how I can maximise that. So the project that I proposed is one that's already partly funded by the Medical Research Council and I am developing with colleagues at King's College London and colleagues here at UCL, a tobacco harm reduction toolkit for use within the homeless sector. And what that means is a set of resources that can help professionals working with people who are experiencing homelessness to quit smoking. What I wanted to do as part of this project is to bring some attention to that project and to understand the various elements because there are many elements to this project. There's those there's the parts that the people who are homeless have helped to co design, there's the parts that professionals have helped to design. And there's the stuff that already exists that we're bringing into the toolkit. So everything's more synthesised. And in one place, I applied for the fellowship, because I wanted to know, which were the parts that might be important to various audiences to different audiences, but how I engage with those audiences. I'm a typical, academic, and I'm stuck in the weeds, bogged down by theory, caveat everything. And that doesn't transfer well to many groups that I need to engage. But I have partly developed this toolkit, but not in the way it hasn't gone as smoothly as I would

have envisaged as projects now, you know, don't do and that's because engaging with certain stakeholders has been difficult. That's because still very much smoking is not seen as a priority within this population. And that's also because people within the sector that I'm trying to resonate with are just extremely busy. So with my colleague, Professor Leon Shahab who's experienced similar difficulties in his projects, what we've actually realised is we need to develop some guidelines or principles or framework, if you like, for how you conduct smoking studies within clinical environments, and, and how that starts from the beginning to the end. So how do you recruit participants? How do you engage staff? How do you engage people that will help with impact? How do you engage with people that would implement this work? So what we're actually doing now is working together and we've got this workshop planned for August, that will be a multidisciplinary stakeholder event, where we go into start to develop some guidelines or Some recommendations for how to conduct smoking studies in clinical environment, across the whole spectrum of research. So from initiation to thinking about the research to disseminating it, and going forward for implementation and impact. So that's what we're doing. First, what we were trying to do is get to the far end, we've what we've already got, but we've we've got stuck a bit earlier. And that's made us realise that the issues that we have a very, very common and maybe people need some guidance on this. So I think what surprised me in this is this was in a good way, there were session that we had on policy impact was uncomfortable in a way because it was like having a mirror of all my bad habits, glaring in front of me. But it is now actually helped me think about how I communicate with policymakers, or people that liaise between researchers and policymakers is helped me shape my expert feedback to the science media centre, for example. Whereas I used to provide feedback or have input to government or local authority reports. or, indeed, if I was responding to a paper with journalists who want to write this up in the newspapers, rather than think, Oh, I haven't quite said that, or I haven't covered that. Actually, what I do now is take a broader approach, I tried to create a narrative arc as it were, over the finding. So instead of getting bogged down in the weeds, and thinking about caveat in everything, I suppose instead of being too, you know, geeky about it, now I take a step up and think, what is it from this that people actually need to know? They don't need to know everything that I know. But they need to know this. So that's really helped me to think about how I communicate as an expert. And of course, you can still sound like an expert without having to tell everybody everything, you know, you can just tell people the bits they need to know, and you're still an expert. But I think that comes with confidence and time. And that session made me think about that it's probably time in my career to be a bit more confident in that.



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I think what I'm really proud of, and I think this comes with time, is that okay, what I plan to do hasn't been a linear journey, I will still get there. But that we haven't we as in my colleague and I, Leon Shahab, we haven't said, Oh, this hasn't worked. We've just reframed it, we've just seen the opportunity from what hasn't worked, and we've repackaged it and reframed it. And what we're going to produce is still going to be incredibly useful for us and other people. And had we not taken a step back and thought, well, you know, this, this isn't, there's, there's an opportunity, not in our failures, but in the in the roughness here, the roughness of the research journey, there's an opportunity here. And we've taken it. And I'm really proud of that, I'm really pleased that we've done that, because I know what we're going to do at this workshop will be really useful to people, it's the sort of thing when we produce it that I wish was existed five years ago. And it's the sort of thing that's not very glamorous in research. But the foundation stuff never is, but it needs to be done. Improving research is something that not everybody sees or gets, we're often so focused on a subject and an area we get about the methods, we

forget about the way that we conduct our science, we forget about the way that we practice our science and ask, you know, the way that we plan our studies. But those things need to be finely tuned all the time. But it's the sort of thing that doesn't really get you the same metrics that you might if you just published papers, if you just focus on your research and grants, but it needs to be done. It's that thing where you know, it's dirty work, but somebody's got to do it. But it's really useful. It is incredibly useful to think about the environment in which we operate, and give some time to improve in that environment. I'm very passionate about that. So the future that I'm hoping for is that Leon and I will produce the set of resources for people to more clearly think about the various stages of smoking cessation studies within clinical environments, and it will help them but what I'm hoping is to get some feedback into how it's helped them, what has helped them, what we could add, what are the parts that were missing and this sort of big I'm a live resource that we can have here based at UCLA with on our website, Utah org. But we continually update that we have a feed back into from people that have used it, that we consider new ways of improving the research process. So I guess I'm hoping that it's going to be a long term project that we that it's, you know, it's a live resource that we just continue to improve. My advice to people would be don't think about impact as the end result of your research, think about the pathways, and think about collecting all the information you can during the research process. And also, when things are not working out in your study, that is not to be hidden away, or so you know, a spot of embarrassment that can actually be really useful for thinking about how research can be improved. So seeing the opportunities in the failures or in the rough spots, think about all the ways that the research process is having some benefit, even if it looks like it's a total mess at the time. Take it as an opportunity to improve the process that has an impact on researchers. But in terms of impact of results, again, I would start to engage with people early on. My other piece of advice for people would be don't engage with those that are going to be useful for impact. At the end of the research, include them in the research if you can, if you can get buy in from them early. They will feel more emotionally invested in your work.