

CHSS welcomes Addictive Behaviours Group



The Centre for Health Services Studies has welcomed the University of Kent's Addictive Behaviours Group into the department. Acting CHSS director Jenny Billings said, 'We are very pleased to have the group join us. They have been providing addiction related education since 1982 and have a great research programme. The certificate, diploma, and BSc in substance misuse management, are all nationally respected courses. The group works with the NHS, the Salvation Army, local Drug Action Teams, the Kent Council on Addiction and the National Treatment Agency for Substance Misuse in the South East.'

BSc Programme director and clinical psychotherapist Ruth Webb describes the teaching programme as being, 'Designed for people who work with problematic substance users. Students learn how to engage clients in the context of political and environmental issues. Students can specialise in both management and clinical practice. The BSc pathway provides an in-depth study of psychological and biological aspects of addictive behaviours and training in research skills.'

Dr Adrian Bonner leads an ongoing UK-wide survey of mental health issues in people

using homeless services, in collaboration with the Salvation Army and Cardiff University.

Adrian's research also focuses on the role of nutritional factors in improving cognitive function and combating addiction. This has developed into an innovative screening, assessment and outcome monitoring system for use in the delivery of services.

Anthropologist Axel Klein is concerned with the role drugs play in social settings, their meaning and the perception of risk among users and drug control professionals. Current research interests are the use and

distribution of khat in the Horn of Africa and among migrant populations.

Andy Ashenurst is a medical anthropologist and social psychologist. His interests include drug-using subcultures, drugs and mental health and its impact on service provision. He is currently researching single homelessness with the Porchlight charity in Kent.

The closure of the Kent Institute of Medicine and Health Sciences (KIMHS) brought the group into CHSS during 2008.

Website: www.kent.ac.uk/chss/abg/index.html

The Centre for Health Services Studies is a six star rated international centre of excellence for health service research and research training. The centre draws together a wide range of research and disciplinary

experience. It undertakes commissioned research and has a portfolio of competitively funded studies focusing on addictive behaviours, ethnicity, social exclusion and vulnerable groups. It has a dedicated

pragmatic trial and survey unit. CHSS is funded by the Department of Health to support research in the NHS in Kent, Surrey and Sussex. The Director of the Centre is Professor of Health Studies Andy Alaszewski.

Helping combat addiction: research and service



Clients of Salvation Army detoxification or rehabilitation programmes have regular blood and urine tests to help monitor their progress. Initially, clients are tested every day and the samples sent to the University of Kent for processing. A small CHSS team manages over 3,300 urine and blood samples for the Salvation Army a year in a dedicated laboratory.

Final year PhD student and Salvation Army Biomedical Service Manager, Margherita Grotzkyj-Giorgi says, 'We test for all the commonly used drugs, including methadone and benzodiazepines, to see whether clients are complying with their

programmes. We help Salvation Army staff understand the results. Providing accurate results and interpreting them correctly is crucial for maintaining good relations with clients. We spot when people tamper with their samples and identify when a substance is being abused without permission. A client who according to centre staff was supposed to be on methadone treatment tested negative for methadone. Because of this unexpected result we were able to suggest staff check the room for any drug taking paraphernalia. Sure enough, they found the unused methadone lined up in the bathroom and equipment for smoking heroin. It is part of supporting staff to help clients progress on programmes.'

The CHSS team also have a research programme developing nutritional screening services. They are developing blood sampling to detect nutritional biomarkers (liver function tests, pre-albumin, vitamins, amino acids, neuroactive tryptophan metabolites and melatonin). Good nutrition is vital for underpinning recovery from addiction and in preventing the brain damage seen in long-term alcohol misusers, homeless and elderly people.

The team are proud of their work. Margherita comments 'we are active in research and undertake routine service work, working closely with practitioners, so we feel we are experts in this area. We understand the science and application of the technology in a challenging field.'

The laboratory meets exacting UK National Quality External Assessment Standards. 'In fact, we usually get 100% in the tests to meet this standard,' says research assistant Enrico Pignotti.

The research team would like to collaborate with other researchers working in this area and expand the analysis service to more projects.

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Evaluating a Kent mining village community project

Aylesham village, between Canterbury and Dover, was built in the 1920s for miners who came to work in the Kent coal mines. The same families still live in the village and Aylesham has kept much of its mining culture and traditions (including the annual carnival, held every year since 1929!). The pits closed in the 1980s and a wide range of initiatives were introduced to provide leisure facilities and alternative employment opportunities.

Senior research fellow Jenny Billings has been evaluating a 'Delightful community project to engage Aylesham families in fun and creative activities to broaden family learning skills.' The five year project targets excluded and vulnerable families and is funded by the Big Lottery. The evaluation exercise aims to find out about the accessibility of the scheme, its relevance in



breaking down barriers to learning and its helpfulness for families. Jenny is holding focus groups with the families taking part in the project and using questionnaires to evaluate the project.

Jenny says; 'It is one of my favourite projects. Children aged from birth to 16 can be referred by health visitors and other

practitioners, or families can sign themselves up. The team put on a wonderful programme of activities, from circus skills, making puppets and creating shows to becoming an inventor for the day. I just love watching parents and children learning together.'

This project is part of the Aylesham Neighbourhood Project, a charitable company, managed by a committee of dedicated local parents and residents. It has created 120 jobs, works with 20 local businesses on site, and has eight community organisations.

Website: www.aylesham-np.org.uk/

For more information contact Jenny Billings
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Investigating the Kent shortfall in GP training

CHSS researchers are using mixed research methods to identify the reasons for the low number of General Practices training new GPs in East Kent. In some parts of the country over 90% of General Practices train new GPs, but in East Kent the figure is only 25%. Eastern and Coastal Kent Primary Care Trust's Workforce Development Manager, Debbie Dunn explained that, 'Big changes in General Practice training from next year onwards, with trainees having to spend nearly two years instead of one in general practice, mean that new General Practice training places must be developed.'

The PCT wants to find out what it can do to make providing General Practice training more attractive to General Practices. Interviews and focus groups led by researchers Annette King and Linda Jenkins will help gain a better understanding of the views of GPs on the benefits and burdens of being a trainer. Incentives and barriers for GPs and practices to take on a training role will be tested by a survey across East Kent General Practices. The project will report in the summer of 2009.

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Guernsey Healthy Lifestyle Survey 2008



With an area of just eight miles by five, the island of Guernsey is home to around 60,000 people. France is visible on a clear day and Weymouth is less than 100 miles away, but do its inhabitants share the health concerns of the larger communities?

The answer is to be found in the series of health and lifestyle surveys undertaken on behalf of the States of Guernsey Government. Over the years, the great majority of island inhabitants have regarded their lifestyle as healthy. Significant numbers report making changes in their diet away from fried food, sugar and convenience foods towards fresh fruit and vegetables, yet

obesity has been on the increase – particularly for women.

This year, public health specialist Linda Jenkins is leading on analysis and interpretation of the 5th survey. Linda said, 'We are repeating the 2003 survey for Guernsey Health and Social Services Department. They are keen to monitor trends in obesity levels five years on, and to see how successful health promotion messages have been in countering the emerging problems of smoking and drinking among young people.'

For more information contact Linda Jenkins
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Models of health promotion for older people

Senior research fellow Jenny Billings and lecturer Patrick Brown have concluded work on the EU funded project Health Pro Elderly by editing the final report. The 46 page report, published in November 2008, sets out guidelines and recommendations for models of health promotion for older people.

Patrick Brown says the report, 'Has been welcomed by the NHS health promotion

specialists we have shown it to. Some of the European initiatives surprised them and they found the ideas stimulating. They particularly liked examples that are set in day to day life and that work for the communities of older people they serve. I hope the report will be taken up widely.'

The project began in April 2006 and concluded in December 2008. Seventeen partners from 11 member states (Austria, Czech Republic, Germany, Greece, Italy, the Netherlands, Poland, Slovenia, Slovakia,

Spain and the United Kingdom) participated in the project.

Website: www.healthproelderly.com

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Award scheme funds CHSS masters student

In 2008 things looked up for postgraduate student, Cathy Finnis because she was able to enrol on the CHSS MA in Health Services Research, with the support of a Snowdon Award. The Snowdon Award Scheme is a charity that provides grants to students with physical or sensory disability, to help them complete further or higher education or training. Cathy is a medically qualified doctor but developed systemic lupus erythematosus and antiphospholipid syndrome in her 20s. This led her to look at alternative career paths and research was something that she felt passionate about. 'The Snowdon Award has really boosted my confidence and it means a lot that people are prepared to 'invest' and believe in me, despite my physical limitations,' says Cathy.

The MA provides an advanced course of study in health services research. It helps access a range of career opportunities in health and social care research and creates an opportunity for career development for new graduates or health service professionals. The MA aims to produce graduates with skills in health services research and a critical understanding of current health issues and the research agenda.

Course director Patrick Brown says, 'This course focuses on health services research using designs and methodologies developed within the social sciences to research issues relevant to health and healthcare. The MA is a flexible programme which can be taken on a full or part-time basis and includes a large element of independent study.'

Website: www.kent.ac.uk/chss/courses/ma_healthservices_research.html

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Social exclusion and student experience

CHSS lecturer Dr Susan Kenyon, who teaches qualitative research methods to MSc students at the Medway School of Pharmacy, has won funding from the University of Kent to research the role of transport in students' experience of higher education.

Difficulties with transport could be preventing people from choosing the right institution; it may be restricting their choice of subject; it might be preventing them from attending all of their classes, or making them late for class, affecting their results. Lack of or unsuitable transport, may be stopping people from making or seeing friends and family, making them unhappy, unhealthy and maybe leading them to drop out of university.

Although around 40 percent of 17 to 30 year olds now attend university, there are still differences in participation rates among different social groups. 'Research has shown a range of barriers to widening participation, but transport has not been considered as a barrier to participation,' Susan explains. 'There is growing awareness of the links between transport and social exclusion. We think that non-traditional students are more likely to experience transport difficulties than students from traditional backgrounds.'

Results will be shared with the Students' Union, the Partnership Development Office and the University of Kent Travel Planner.

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Medway oral health survey



CHSS has been commissioned to survey the oral health status and needs of 8000 people aged 16 and over in Medway. Responses to questionnaires sent out in June 2009 will indicate the current state of people's teeth, the impact of dental health on their quality of life, current oral health and hygiene behaviour, general health and health behaviour. Dental health is also closely linked to stopping smoking and the survey will help support smoking cessation activities.

Medway Primary Care Trust is funding the study because of concerns about oral health, especially among residents of its more deprived areas. The sampling has been designed so that local areas can be studied in detail. The survey will report separately on dental health in Rochester and Strood, Chatham, Gillingham and Rainham.

'We expect to find at least 15 percent of the adult population are without teeth', says senior research fellow and public health specialist Dr Ann Palmer, who is leading the study. 'Complete loss of all natural teeth can really reduce quality of life, self-image, daily functioning and has a big impact on health.'

The project will report at the end of 2009. A full report and summary will be produced and the public will be informed of findings using leaflets and press reports.

For more information contact Dr Ann Palmer
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CHSS helping to tackle obesity in the South East

A CHSS project was showcased in January 2009 when health professionals, leisure and fitness workers and policy makers from regional and local Government across the South East came together, to discuss progress in the region to tackle obesity.



The 'Am I Bovered?' project, run in association with Eastern and Coastal Kent PCT was highlighted as a successful scheme. It is aimed at encouraging teenage girls to get more physically active as this is a group who often drop out of doing exercise.

Researchers Jan MacVarish and Ferhana Hashem recently observed an afternoon session with year 11 girls on a climbing wall in Broadstairs. The researchers were there to motivate girls to take part in physical activity and introduce them to new kinds of sports. The girls were enthusiastic. One said, 'It was really good and I was glad that we had a go at abseiling' and another wanted to try out the activity again, 'It was very enjoyable and I would definitely go again.'

The research team developed and ran an eight week programme of physical activity across the summer term which included aqua-aerobics and trampolining as well as the climbing wall.

The project is funded by the Big Lottery as part of chances4change, a programme of health-related projects running across the South East.

For more information contact Jenny Billings
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New support for health researchers

CHSS and the Universities of Surrey and Brighton were recently awarded over £5 million to provide research support services for the next five years to the NHS in Kent, Surrey and Sussex.

The South East Research Design Service is up and running and new grant proposals have been submitted by health professionals with the support of academics in the three universities.

The three universities are working together to provide the service, which is free and open to all with an interest in applying to the National Institute for Health Research (NIHR) for health-related research grants.

The team of research advisors are available to support bids to the NIHR programmes in Canterbury, Guildford and Brighton. They run a series of workshops to assist applicants and provide one to one advice.

In recent years the Government has acknowledged the central role that public funding plays in promoting world-class, high-value, patient-focused research, and its total investment in health research will top £1.7 billion per annum by 2010/11.

There are ten new Research Design Service (RDS) units across England – all based in universities – who have been awarded five year contracts.

These contracts provide expert advisory services to help novice or less experienced researchers develop bids for funding for health and social care research.

The aims of the new units are to increase the volume and quality of successful grant applications for NIHR funding, and to provide consistency across England in the support provided.

Professor Sally C Davies, Director General of Research and Development at the Department of Health said recently, 'each Research Design Service will perform an important role by providing expert advice to local researchers. With more government funding available now than ever before through the NIHR, we want to encourage the development of high quality research applications for the benefit of NHS patients'.

Website: www.nihr.ac.uk/infrastructure/Pages/infrastructure_research_services.aspx

Or: www.rds-se.nihr.ac.uk/

Report on ethnic options of British mixed race people guides 2011 Census

Geraldine was born and raised in Birmingham by a Malaysian mother of Chinese and Indian descent and a British father. Michael's mother is Finnish. She came to England and married a British Army soldier from Kashmir. Both Geraldine and Michael find it difficult to say to which racial group they belong. As children, both identified with their mother's home country, especially after spending holidays there. Michael says, 'As a child after summer holidays in Finland, I felt Finnish, but now I can look anything from English to Asian or Middle Eastern, depending on how I shave and what I wear. I don't feel part of any racial or ethnic group particularly.'

It was stories like these that prompted new research into the notion of hybridity, in which identities are the product of mixing, interfusion, and multiple allegiances. A recently completed joint CHSS and School of Sociology, Social Policy and Social Research project explored how young 'mixed race' adults identify themselves and the results have informed the development of ethnicity questions for the 2011 Census.

The project was undertaken by researchers Peter Aspinall, Dr Miri Song and Dr Ferhana Hashem. Young adults were recruited from higher and further education through links to on-line surveys. 65 respondents were selected for in-depth interview from 326 questionnaire responses.

The study was funded by the Economic and Social Research Council and the end of report was awarded an 'outstanding' rating by the research council. Results were presented at this year's American Sociological Association Annual Conference in San Francisco.

The report revealed the following:

- most respondents gave a description of their racial or ethnic identity rather than a single generic term, 60 percent naming two groups and 20 percent three or more groups



- a third of respondents identified as 'mixed race', but almost half selected more than one option, identifying at times with a single group, more than one single group, as 'mixed race', and not identifying along ethnic/racial lines, depending on their situation
 - almost a third of respondents felt that they could not prioritise just one racial or ethnic group that best described their racial/ethnic identity in a forced choice question. Amongst those that could, 'White' was less accessible to Black/White respondents than others whose mix included 'White'.
 - the course being studied or work done, age or life-stage, education and family, were all considered more important than race or ethnicity in personal identity
 - around 40 per cent were raised as 'mixed race' against just 12 per cent as a member of a single racial or ethnic group
 - more co-resident mothers than fathers had the strongest influence on identity amongst female responders
 - a third said that the way they were seen by society had an effect on the way they identified themselves, whilst a half said that it did not. Some adopted society's perception, whilst others resisted it when it did not match their own
 - three quarters felt that black and Asian people, Muslims and asylum-seekers were subject to racial prejudice, but only 44 per cent felt 'mixed race' people were subject to racial prejudice
 - just over one third reported membership of a group discriminated against in this country
 - for nearly three in 10 respondents, the move to college or university had seen them change their racial/ethnic identity. Almost invariably these were positive changes, with respondents better able to identify with various heritages and being more comfortable in doing so
- In terms of the census, Peter Aspinall reports that, 'We tested three versions of categorisation for the 'mixed' group: the 2001 Census four options, a free text option, and multi-ticking across all ethnic categories (as used in the USA). Multi-ticking performed the worst and has not been adopted for 2011'.
- Website: Aspinall PJ, Song M, Hashem F
The ethnic options of 'mixed race' people in Britain: Full Research Report, 2008
www.kent.ac.uk/chss/about/staff/aspinall.html
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Recent CHSS selected publications 2008/2009

2008

Alaszewski, A. (2008). Communicating vaccine risk with patients and parents. *Vaccination, Tenth edition* (Spring 2008), 12-13.

Alaszewski, A. & Alaszewski, H. (2008). Towards the creative management of risk: perceptions, practices and policies. *British Journal of Learning Disabilities*, 30, 56-62.

Aspinall, P. J. (2008). 'Non-white': a candidate for the lexical room 101. *Journal of Epidemiology & Community Health*, 62(10), 875.

Bonner, A. & Luscombe, C. (2008). *The Seeds of Exclusion: Salvation Army*.

Carpenter, G. I. & Stosz, L. M. (2008). *Developing the use of 'MDS-RAI' reports for UK care homes*. York: Joseph Rowntree Foundation.

Coulton, S., Brearley, S., Atwell, C., Bryan, S., Cox, H. & Russell, I. (2008). The cost-effectiveness of MRI of the knee for patients presenting in primary care. *British Journal of General Practice*, 58, 775-778.

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Coulton, S., Watson, J., Bland, M., Drummond, C., et al. (2008). The effectiveness and cost-effectiveness of opportunistic screening and stepped care interventions for older hazardous alcohol users in primary care (AESOPS) – A randomised control trial protocol. *BMC Health Services Research*, 8, 129.

Hastie, C., Carpenter, G. I., Morris, J. N., Fries, B. E. & Ankri, J. (2008). Nursing Home Residents with Moderate to Severe Cognitive Impairment and Change in their Physical Function. *Research and Practice in Alzheimer's Disease*, 13, 116-120.

Hutton, E. & Coxon, K. (2008). Involving parents as service users in an interprofessional research project. *Journal of Interprofessional Care*, 22(6), 1-3.

Kenyon, S. (2008). Internet Use and Time Use: The importance of multitasking. *Time Society*, 17(2/3), 283-318.

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2009

Aspinall, P. J. (2009). 'Mixed race', 'mixed origins' or what? Generic terminology for the multiple racial/ethnic group population. *Anthropology Today*, 25(2), 3-8.

Aspinall, P. J. (2009). Suicide rates in people of South Asian origin in England & Wales. *British Journal of Psychiatry* 194, 566-567.

Carpenter, G. I., Bridgelal Ram, M. & Williams, J. G. (2009). Standardising medical records: improving patient care and informing the evidence base. *British Medical Journal*.

Day, M., Klein, A. & Norman, L. (2009). The need for drug treatment in the prison environment of the Caribbean. In M. Day (Ed.), *Developing a Treatment and Service Continuum for Offenders. Caribbean Regional Resource and Guidelines*. Castries, St. Lucia: CDARI Press.

Fox, C., Maidment, I., Smithard, D., Katona, C., Livingstone, G., Boustani, M., et al. (2009). An observational longitudinal study using a previously validated tool of the anti-cholinergic burden in a cohort of 224 people with Alzheimer's disease (AD). *The Journal of Nutrition Health and Aging*, 13;S10-OB7-089-5.

Grotzkyj-Giorgi, M. (2009). Nutrition and addiction: can dietary changes assist with recovery? *Drugs and Alcohol Today*, 9(2), 24-28.

Kenyon, S. (2009). The impacts of Internet use upon activity participation and travel: results from a longitudinal diary-based panel study. *Transportation Research Part C*, Available online, <http://dx.doi.org/10.1016/j.trc.2009.1004.1014>.

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Law, Durham, North Carolina: Carolina Academic Press.

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Lewin, R. J., Coulton, S. & Frizelle, D. J., et al. (2009). A brief cognitive behavioural preimplantation and rehabilitation programme for patients receiving an implantable cardioverter-defibrillator improves physical health and reduces psychological morbidity and unplanned readmissions. *Heart*, 95(1), 63-69.

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Stosz, L. M. & Carpenter, G. I. (2009). The use of an assessment tool in care homes. *Nursing Older People*, 21(1), 24-25.

Van den Bree, M. B. M., Shelton, K., Bonner, A. B., Moss, S., Thomas, H. & Taylor, P. J. (2009). A Longitudinal Population-Based Study of Factors in Adolescence Predicting Homelessness in Young Adulthood. *Journal of Adolescent Health*, 1-8.

Varnik, A., Kolves, K., Allik, J., Arensman, E., Aromaa, E., van Audenhove, C., et al. (2009). Gender issues in suicide rates, trends and methods among youths aged 15-24. *Journal of Affective Disorders*, 113, 216-226.

Williams, J., Russell, I., Dharmaraj, D., Cheung, W. Y., Farrin, A., Bloor, K., et al. (2009). Effectiveness of nurse delivered endoscopy: findings from randomised multi-institution nurse endoscopy trial (MINuET). *British Medical Journal*, 338(7693), 515-518.

New appointments

Amanda Bates

As public involvement officer for the NIHR Research Design Service South East (RDS SE), Amanda works with the public to promote their involvement in the design of research and to review research funding applications. Amanda also advises researchers about the various ways of involving service users in research design, from reviewing recruitment strategies to the dissemination of results. Amanda is looking forward to starting a PhD later this year and will be investigating the area of service provision for young people with learning difficulties who also have a cleft lip and/or palate.



Amanda Bates

Nicole Hellyer

Nicole graduated in 2006 from the University of Surrey with an honours degree in Nutrition and Dietetics. She is a state registered dietitian and professional member of the British Dietetics Association. Nicole is currently employed two days a week in CHSS evaluating social marketing campaigns on behalf of Eastern and Coastal Kent PCT, whilst finishing writing up her thesis entitled "Consumer perceptions and attitudes towards whole grain foods".



Nicole Hellyer

David Kocman

David has joined CHSS on a part time basis, having studied anthropology and sociology. He currently holds the 1+3 ESRC PhD studentship in Social Policy at SSPSSR. His area of interest concerns practices of changing social care and citizenship through reorganisation of accountability technologies (standards, procedures and forms).



David Kocman

Mary Mustafa

Mary Mustafa has joined CHSS from SSPSSR and is now the data support officer for the NIHR Research Design Service South East (RDS SE). This is a new post, created to manage the input and retrieval of data records in support of the RDS SE. The RDS supports clinicians developing health research bids for submission to the National Institute of Health Research funding opportunities. A team of research advisors meet with clinicians often over a long period of time, to offer advice and practical help in writing proposals. Mary's job is to manage the process of recording these activities and to help with outputting the results for reporting and management purposes.



Mary Mustafa

Staff at CHSS

Andy Alaszewski Hon MFPH, BA, MA, PhD
Director of CHSS and Professor of Health Studies

Helen Alaszewski RGN, BA
Research Associate

Andy Ashenhurst BSc Hons, MA, PGCHE
Lecturer, Psychology of Dependence

Peter Aspinall BA, MA
Reader in Population Health

Amanda Bates BA Hons, MSc
RDS SE Public Involvement Advisor

Jenny Billings BSc Hons, MSc, RGN, RHV
Acting Director of CHSS and Senior Research Fellow

Adrian Bonner BSc Hons, PhD, FRSA Reader

Patrick Brown BA, MA, PhD Lecturer

Bridget Carpenter BA Hons, DipM ACIM
Development Manager for R & D

Simon Coulton

Professor of Health Services Research

Joanne Davey BSc Hons Research Assistant

Sylvia Francis RDS Support Officer

Lucy Grayton BSc Hons Research Assistant

Margherita Grotzkyj-Giorgi BSc Hons
Salvation Army Biomedical Service Manager

Samuel Hain BA, MSc Research Fellow

Peta Hampshire Administrator

Ferhana Hashem PhD Research Fellow

Charlotte Hastie BA, MA Research Associate

Nicole Hellyer BSc Hons, RD Research Assistant

Laura Holdsworth MSc Research Associate

Linda Jenkins BSc, MSc, Cstat
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Susan Kenyon MA, PhD Lecturer

Annette King BSc Dip Mhsc
Research and Applications Manager

Axel Klein PhD Lecturer

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This review is published by CHSS, George Allen Wing, Cornwallis Building, University of Kent, Canterbury, Kent CT2 7NF, United Kingdom
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