



Research Report

2024/25

Transforming lives through research

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A message from our EMD, Dr Sanjith Kamath



We are at an exciting stage of our research journey at St Andrew's with an updated research strategy that ensures that we grow in areas of existing strength and identify key external partners in Universities, the NHS and research centres.

The strategy identifies the following key themes that we will focus upon in the coming years:

- Developmental and complex trauma
- Progressive neurological conditions
- Physical health in mental healthcare
- Technology and data
- Forensic mental health

There will also be a focus on the development of service evaluations to better understand the effectiveness of our services. Each division will have a target of service evaluations, and a research lead will be appointed to promote and encourage staff to become involved.

Dr Kieran Breen, our Head of Research & Development, recently attended a NHS R&D Leaders Conference and was really encouraged to compare how St Andrew's performs within the wider research arena. With the changes currently planned within the NHS, research is becoming more challenging with some uncertain times ahead. However, as an independent provider, we have a great opportunity to build upon our solid foundations and cement our reputation as a specialist in mental health research. We can develop specialised interventions, focusing on areas such as trauma-based care, technology or physical health in mental illness, and personalise these according to our patients' individual needs. And at the centre are the patients themselves, with co-production being key to all of our research activities.

We recently conducted a study with our patients to find out what they thought about research. The vast majority were interested in finding out more and being involved in future research projects in the Charity. People are at the heart of research. You will be introduced in this report to some of the staff and students involved in research, along with research volunteers (including staff, students and external volunteers) who have an interest in research and carry out literature reviews or collect data from patients.

This report highlights some of our key research topics, what has been achieved, and the people involved. This will provide a taste of the work that is already taking place, and what we intend to build upon.



Dr Sanjith Kamath
Executive Medical Director





Centre for Developmental and Complex Trauma

Part of St Andrew's Healthcare

Now in its fourth year, the Centre for Developmental and Complex Trauma (CDCT), led by Dr Deborah Morris, continues its work to improve outcomes for people with complex trauma histories, particularly those who face persistent marginalisation in society. Whilst its portfolio includes delivering higher education courses, hosting special interest groups and international conferences, research and service evaluation remain central to the CDCT's approach.

The CDCT's research activities span six trauma focused research streams. In the current year the CDCT has presented **11 papers at national and international conferences**, published **10 papers** in peer reviewed journals and has 6 manuscripts in submission.

This year marks the **100th publication** of the CDCT, with the team securing their first publication in the globally ranked **New England Journal of Medicine**. This body of work has been shaped through meaningful collaboration, both within the organisation and with external partners, and reflects the team's commitment to research that is practical, inclusive and grounded in real-world needs. Further highlights include, Dr Morris acting as guest editor for a special edition of the Advances in Autism Journal, focusing on the trauma needs of autistic people, and the team securing three edited book contracts with Routledge Press. This includes Dr Jon Taylor leading on two books focused on Compassion Focused Therapy. Dr Elanor Webb has also successfully completed her PhD, focused on moral injury in the healthcare workforce.

Real-world influence: developing trauma practice

Developing morally-centred cultures in healthcare

The CDCT are currently engaged in collaborations with researchers spanning Europe, Africa and North America, focused on projects that highlight the importance of organisational cultures in influencing clinician wellbeing and patient outcomes. This includes leading on an international study that derived practice guidance for developing morally-centred organisations in healthcare.

Ensuring trauma needs in underserved populations are met

In collaboration with the Deaf Service at St Andrew's, the CDCT led a recent international study developing guidance for clinical standards relating to trauma practice with Deaf people. This study has led to further collaborations and initiatives, including launching an international Special Interest Group (in collaboration with SIGN Health) and developing new BSL signs for trauma focused language. It not only raises the profile of an underserved community but also provides practical tools and evidence-based recommendations to improve care across the sector.

"With our reflexive approach we do not stand still, we celebrate successes, ask tough questions of all areas and refine our strategy as required so that the vision, our goals and motivation are in sync. The aim continues to be wanting to be world class and leaders in trauma related practice, education, research and development."



CDCT@stah.org



David Gibbs
Policy and Practice Advisor, CDCT



RESEARCH PORTFOLIO

Complex-PTSD

Deaf People

Autogenic PTSD

Neurodiverse people

Moral Injury & Occupational Disstress

CPTSD & Personality Disorder



The CDCT Annual Report 2024-25
can be viewed here

Centre for Progressive Neurological Conditions (CPNC)

Dr Inga Stewart, Head of Progressive Neurological Conditions (PNC) Research Programme and Consultant Clinical Psychologist, is working on the new phase of her research looking at the impact of her dementia care planning co-production toolkit.

Care planning co-production with people with dementia

The toolkit was co-produced with people with dementia, and written with accessibility in mind, ensuring that anybody can pick it up and use it as a framework. With an expanded research team, Inga is now exploring how to effectively measure the level of co-production in care planning. She is also collaborating with the universities of Northampton, Essex and East Anglia, experts by experience of living with a dementia diagnosis, the UCL Co-production Collective, volunteers from the Alzheimer's Society, Dementia UK and also Tide – a national charity run by and for carers of people with dementia.

Huntington's Disease (HD) and risk management

While most of us will be affected by dementia in some way, whether directly or indirectly, Huntington's Disease is relatively rare, affecting around 1 in 10,000 people in the UK.

As such, research on the condition is comparatively limited, with the majority focused on symptom management and the ongoing search for a cure. One major gap identified by Inga and her team is around the impact of psychosocial interventions on behavioural change and risk. To date, there is not enough evidence to support these interventions.

Inga says, "A few years ago, the British Psychological Society published a piece of work looking at psychosocial interventions. And the conclusion was that they couldn't come to a decision because the evidence base wasn't robust enough. So, we've put together a research team to look at how we can measure behaviour that challenges and risk-management interventions in the HD population. Of course, in order to do that, we need to know what it is that we require to measure in the first place.

"Once we know what we're assessing, we can begin testing interventions and strengthening the evidence base. While there is already valuable work being done, we need a robust framework to properly measure its impact."

With a new research team, including Esther Gathii and Fiona Stone, St Andrew's is working alongside the universities of Cambridge and Cardiff and the Huntington's Disease Association, with the support of clinical teams, including within Elysium Healthcare. Inga and her team are determined to ensure that their work across all these areas is translational and will benefit people in their care today.

To learn more about our **Dementia** and **HD services**, visit [our website](#).



"How patient voices are
shaping dementia and HD care"
NR Times



CPNC@stah.org



Physical Health in Mental Healthcare

St Andrew's and Loughborough University have continued their long-term partnership with two co-funded PhDs. Kristina Brenisin and Sarrah Fatima, who were both research assistants in the Research Centre before starting their PhD journeys, provide updates as they come to the end of their first year.

Kristina has made significant progress in her research that seeks to improve physical wellbeing and lifestyle behaviours of patients with severe mental illness (SMI) in psychiatric settings. Ethics approval was successfully obtained for two projects, marking key milestones in her work.

The first study examines the body mass index (BMI) trajectories of patients following admission to secure psychiatric care. With limited evidence on post-admission BMI changes, the study explores clinical, demographic, and other factors that may contribute to BMI change and potentially obesity. Identifying characteristics that predispose patients to weight gain will inform targeted interventions like physical activity and dietary adjustments.

The second study, **STEP@STAH**, is a clinical trial assessing the effects of Wegovy (semaglutide) combined with a lifestyle intervention. Recruitment has begun, and baseline data has been collected. The aim is to recruit 20 patients to evaluate the intervention's impact on physical health and refine it based on feedback from participants and staff to enhance its effectiveness and acceptability.

The findings from both studies will significantly contribute to the development of multi-component lifestyle interventions for managing weight and improving the physical health of individuals with SMI in psychiatric settings.

Sarrah seeks to understand the prevalence of sedentary behaviour and its impact on sleep quality and quantity in St Andrew's adult inpatient population. She intends to create an intervention that will reduce sedentary behaviour and increase physical activity with the hope that this will improve sleep hygiene.

Sarrah has completed a first draft of a scoping review that sought to understand and highlight the overall prevalence of sedentary behaviour and daytime napping. The scoping review intended to document the cited sedentary behaviour domains (such as watching TV and reading) that people frequently engage in.

The second study is an observational study that aims to observe the levels and type of sedentary behaviour in which St Andrew's patients are engaging. The study has obtained ethical approval and is in the process of patient recruitment.

The findings from both will inform the development of an intervention programme which will target sedentary behaviour and poor physical activity engagement and will contribute to improving sleep hygiene in the adult population.



Technology and Data

Technology has great potential for the treatment of people with severe mental illness. At St Andrew's, we have previously carried out studies using virtual reality (VR) to help people with dementia as well as treating people with social avoidance problems.

More recently, Dr Kieran Breen has embarked on an exciting collaboration with Professor Mu Mu at the University of Northampton to develop and test an automated system to deliver a high-quality "Eye Movement Desensitisation and Reprocessing" (EMDR) trauma therapy. EMDR has wide applications, for example, treating trauma from serious accidents, painful early experiences and combat exposure. Using VR for this therapy could create a faster, more convenient and cheaper way for people to get treatment through the NHS. With this system, patients could get more timely, safe, life-changing therapy in a more comfortable setting, while experienced therapists will still support their treatment. The National Institute for Health and Care Excellence (NICE) has already highlighted the use of remote therapies as the way forward for certain therapies.

What is EMDR?

EMDR uses eye movements to help patients recover from past traumatic experiences that affect their mental health and daily lives.

Initial studies were carried out to test the feasibility of the new VR therapy system to treat people with phobias, and the results were very promising. After only five sessions, participants reported reduced distress, diminished phobia-related sensations and greater confidence in confronting previously avoided situations. Everyone who took part in the study were confident doing the VR therapy on their own following the initial guidance from the therapist.

The next step is to turn this into a practical and affordable treatment option for complex trauma, such as Post Traumatic Stress Disorder (PTSD), and we are working with the University to obtain funding for a larger trial.

Publication

Chan, O., Mu Mu., Dohan, M., Debus, A, Nicholls, D., Wallang, P. & Breen, K. (2025) Usability, Feasibility, and Preliminary Outcomes of VR EMDR Therapy for Specific Phobia: Mixed Method Study.



Translating Research Into Action

At St Andrew's Healthcare, research isn't just about generating knowledge – it's about making a real difference in people's lives. This year, two standout projects have done just that: one is transforming how we support long-stay patients with learning disabilities and autism as they move toward discharge, and the other is redefining how we approach sexual wellbeing and safety in recovery.

Supporting discharge and recovery

For people with learning disabilities and autism in secure care, leaving hospital can be one of the most difficult parts of the journey. The LDA Impact Network is addressing this by improving the entire pathway from admission to discharge, ensuring support is person-centred, timely, and empowering. Building on insights from the *Why Are We Stuck in Hospital?* report and its widely shared **10 Top Tips** we've created a practical admission-to-discharge flowchart. Designed for use by staff, commissioners, and families, this tool walks through each stage of the patient journey and will soon be trialled on one of our LDA wards. It aims to embed good practice into everyday planning and decision-making.

A self-evaluation survey has already helped us identify where we can do better, and in response, we're developing tailored resources to help teams apply the **10 Top Tips** in everyday situations.



Taking a holistic approach to sexual wellbeing and safety



We believe that recovery is about more than clinical treatment – it's about dignity, personal agency, and quality of life. That's why we've taken a new, holistic approach to sexual wellbeing and safety, recognising the essential role of relationships, intimacy, and personal identity in long-term recovery.

Drawing on insights from our collaboration with Professors Paula Reavey and Steven Brown, we've developed a new **Sexual Wellbeing and Safety Policy**. Informed by leading research and shaped by the voices of people with lived experience, the policy moves beyond a purely risk-focused model. It aims to balance safety with a deep respect for each person's rights, dignity, and personal wellbeing.

One of the most important outcomes of this work is a new staff guidance booklet, co-produced with patients and clinical teams. It offers practical tools, reflection exercises, and real-world examples to support staff in having open, confident conversations about relationships and sexuality.

Together, these projects reflect our deepening commitment to personalised, compassionate care. By equipping our teams with knowledge and encouraging a culture of openness and trust, we're supporting every aspect of recovery – from discharge planning to the right to love and connection.



**Research
Centre**
Part of St Andrew's Healthcare



And finally...



A word from one of our placement students and a patient who took part in a research project



“In my opinion, one of the most valuable things you can do with a service user is simply take time to sit down, engage in conversation and listen. This can often mean more to them than anything else.”

**Aisling Forde, PhD Student Researcher,
Munster Technological University**

“It (research) helps other people...and achieve a greater awareness of my illness. I’ll do anything if it helps me...and if it helps other patients too, I’m willing to do it”

Quote from a patient participant



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Groundsman at St Andrew’s
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