

# My journey from social care to public health research

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## Beliefs

- **Social justice** – fairness of wealth and opportunity in society. People should lived in a society where they have equitable access to healthcare, employment and housing; human rights are promoted; and discrimination is challenged.
- **Feminism** – advocating for equal rights for women based on beliefs that society prioritises the male point of view which leads to unfair treatment of women. My belief is that feminism needs to be intersectional and take in to account the different ways that women experience discrimination, including their race, class, disability and sexuality.
- **Environmentalism** – concerns about the negative impact humans have created in the natural environment and the consequences this has for human and planetary health. Interest in how we create a more sustainable future.

## Background

I grew up in a working class community in the Midlands which experiences high levels of health inequality and addiction. This, along with disability experienced by members of my family, made me want a career where I could help people.

### Career

I started out working in health in 2008 for the NHS in Derbyshire as a peer outreach worker delivering sexual health advice, condoms, and chlamydia screening in colleges, pubs, nightclubs, and at community events.

I graduated from the **University of York** with a **BA (Hons) Social Work** in 2012 and went to work in Australia supporting people seeking asylum.

I wanted to specialise in working with people experiencing drug and alcohol issues. I completed an **MSc Drug and Alcohol Studies** at the **University of Glasgow** in 2014. After this I worked in different settings including a 24-hour harm reduction service, a residential rehab for women and their children, and a third sector health and wellbeing service which supported children and young people with their mental health, sexual health, and substance use. In this service I set up a project which supported young people with their own substance use and/or parental substance use.

### Drivers for moving from social care to public health

- Underfunding of the drug and alcohol sector
- Better understanding of the role of public health
- Wanting to develop but lacking opportunity in my field
- Growing frustration with delivering individual interventions when people were experiencing systemic societal issues
- Feeling like people in practice weren't listened to, which drove me to want to work more strategically and support better collaboration between policy, research and practice

## Research journey

### New role

Moved to work in public health for NHS Lothian leading on drug use and blood borne virus in their health promotion team.

### Support Middlesex University on 'Exchanging Prevention practices on Polydrug use among youth In Criminal justice systems' (EPPIC) project

I was approached by Professor Betsy Thom to get involved in this research project as I worked with young people experiencing issues with drug use. I recruited and interviewed young people for the UK part of this research.

### Lead researcher for a PPI service improvement project for NHS Lothian

Again, through my experience of working with young people, I was asked to lead a collaborative project to improve access to sexual health services for care-experienced young people in Edinburgh.

### Poster presentation:

Faculty of Sexual and Reproductive Healthcare Annual Scientific Meeting 2019

### Move to Public Health England to work within the national alcohol and gambling team

Initially working on alcohol supporting the distribution of local authority grants, I soon got to be involved in research as a large scale evidence review on gambling was going on and COVID-19 put resource pressure on the team.

### Evidence review on gambling-related harm is published on the final day of Public Health England!

The evidence review comprises of six studies and a summary report. I supported the abbreviated systematic review on gambling-related harm and led the rapid review of the impact of COVID-19 on gambling behaviour. I also led on the dissemination of the evidence review.

### Next day

Public Health England (PHE) becomes the Office of Health Improvement and Disparities (OHID)

### First peer review publication!

Recent reviews find limited evidence on effective interventions and policies for reducing gambling-related harm. I'm part of a team which undertake a Delphi and implementation rating study to explore policies and interventions to reduce harmful gambling<sup>1</sup>.

### Poster presentation: Current Advances in Gambling Research conference 2022

We realise we could do better at communicating the knowledge gaps found in the evidence review on gambling-related harm so we pull this out more clearly in a poster.

### Awarded NIHR pre-doctoral fellowship

### Second peer review publication

I co-author a paper with academics in Scotland partly based on the service improvement research I undertook in Edinburgh. The paper explores involving young people in sexual health research through the lens of three different projects.

## Plans for pre-doctoral fellowship

- Increase my quantitative research skills to compliment my existing qualitative skills
- Support NIHR SPHR research project: 'Conceptualising local systems of consumption that produce inequalities: the night time economy'
- Complete a review to explore the impact of financial harm on health
- Undertake a placement with Sheffield City Council to support their work mitigating the health harm to residents from unhealthy commodities
- Apply for NIHR doctoral fellowship to undertake a PhD project on the **commercial determinants of health**

### OHID Gambling Treatment Needs Assessment

Yet to be published. My final role at OHID was to complete a needs assessment of the gambling treatment system in England. It used mixed methods to explore what is working well in the current system and areas for improvement.

1. Regan, M., et al. (2022). "Policies and interventions to reduce harmful gambling: an international Delphi consensus and implementation rating study." *The Lancet Public Health* 7(8): e705-e717.

2. Ruth, L., et al. (2023). "Involving young people in sexual health research and service improvement: conceptual analysis of patient and public involvement (PPI) in three projects." *BMJ Sexual & Reproductive Health* 49(2): 76.

