



University of Dundee

Public Engagement Project Report

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Innovation and Impact Development Fund (IIDF): Completed Project Report

This template should help form the basis of your IIDF project report, as acknowledged in the application process. Each section has some guidelines of what to include, but please expand on these as you wish. If you would prefer to submit your report in an alternative format, or have any additional materials to include such as photography etc., please email Ellen Pauley (e.z.pauley@dundee.ac.uk). (Recommended length approx. 1000-1500 words max.)

The information provided in the project reports will be used to create case studies that will promote and celebrate innovative and impactful collaboration between the University and regional organisations. (All data will be held securely in accordance with UoD procedures. Any case studies and promotional materials we generate from IIDF projects will be done so with input and relevant permissions from you and your external partner.)

If you have any questions, please contact Jamie Henderson (j.z.henderson@dundee.ac.uk) and Ellen Pauley (e.z.pauley@dundee.ac.uk).

* Required

* This form will record your name, please fill your name.

DR SIYANG YUAN

1. Academic Lead *

DR SIYANG YUAN

2. Project Title *

Co-design/co-production workshop to engage migrant and ethnic minority groups in health and oral health promotion research

3. Partner Organisation *

• About them: who they are, what they do, why academic collaboration was required (e.g. facilities, expertise, etc)?

· Contact details (if applicable/available; for case study/testimonial purposes)

• Dundee International Women's Centre (DIWC): <u>https://diwc.co.uk/</u>

DIWC is a grassroots organisation and sees it future as continuing to provide and develop services led by community needs and underpinned by their values. It provides opportunities for marginalised and socially excluded women, with an emphasis on those from BME (Black and Minority Ethnic) and migrant communities, to reach their full potential and prosper in their communities. As an organisation that provides culturally diverse, sensitive and appropriate services, DIWC has built a positive reputation within the communities it supports and provided a range of services including classes, social groups and awareness-raising events.

4. Introduction *

- · Background to the project (e.g. any relevant sector context, how did you connect, etc)
- What was the purpose of the collaboration?
- · What challenge did you want to solve/goals did you want to achieve together?
- · What outcomes/impact did you envision for the project?

Migrant and BME (Black and Minority Ethnic) groups are more likely to suffer from poorer health and oral health. However, they have been underrepresented in research and health promotion interventions for decades (1). This reinforces the importance of using participatory research to capture the realities and health needs of these groups to inform policy and interventions addressing health inequalities. The purpose of the collaboration was to establish and maintain working partnership with the DIWC to address their needs by listening to them and working alongside with them to identify enablers/inhibitors for them to participate in research.

We have delivered successfully a series of co-design workshops by engaging with BME mothers from DIWC. Such dialogue with them and the collaboration will enable them to understand what research is about, to listen to their voices by understanding their health and oral health priorities, and to collaborate with them to tease out practical tips to engage them better in research.

5. Aims and Objectives *

• What were the actions taken by the academic and organisation to find a solution/achieve these goals?

· (if applicable, please note any UoD research facilities/equipment/resources utilised, and any in-kind support received from the organisation)

AIM: The proposed project was to engage individuals from migrant and BME groups and members of staff who work with these groups from the local community to share their experiences, views and perceived challenges and opportunities to improve migrant and BME groups' research participation, and therefore to identify effective strategies to engage these socially excluded groups in health and oral health research.

We developed the co-design workshops alongside with the community workers as well as PPI manager of Ninewells Hospital to work out a plan to best engage them through interactive activities during the workshops.

6. Outcomes/Reflection *

- What were the findings/outcomes from the project?
- Was it a positive collaboration experience?
- · Did the project run smoothly/to plan?

The co-design workshops were successfully delivered through effective engaging with BME women in the DIWC as the venue. We found the themes such as communication, cultural needs, accessibility of information, providing space and time are key discussion points identified during the workshops. This was a very positive collaboration experience – both the university team and the local community (community workers as well as their service users) had provided positive feedback on their co-design experience. The project ran smoothly.

More importantly, our outputs of this project, i.e. a poster and a booklet, have been received very positively. Our artist Cat Laird has dedicated her art work to her close involvement in the co-design workshops as well as constant discussions with the PI, Siyang, to co-create the content and the design ideas when developing the final booklet and the poster. Such experience has helped Cat to better understand both the participants' perspectives as well as engaging with the main purpose of this project.

7. Impact Summary *

What did the project achieve for/ what is the impact on:

- · the organisation
- · the industry/sector(s) as a whole
- · the University
- \cdot the region

Through the project, the participants from DIWC have learned (i) what the research projects are for? (ii) the role for BME people in the research process including planning, delivery and evaluation, (iii) their voices should be listened and their health priorities should be valued, (iv) collaborative working between university and communities could share experiences and perspectives to create a shared goal and vision.

For the University, we learned very much by listening to the BME women from DIWC on their understanding of research (i.e. research is important for creating knowledge and informing decisions), their identified priorities for promoting health and oral health (i.e. child oral health), their views about practical tips to engage better with their groups through effective communication, addressing their cultural needs, providing space and time for them to understand the research projects and made decisions, improving accessibility of research information.

Dundee has been one of the most deprived areas in Scotland. For most BME people, their low participation in research does not mean they are not interested or being too busy with their lives. As researchers, we should promote the accessibility of the information to reach out to these socially excluded communities.

8. Future Opportunities *

What are the next steps for further engagement, collaboration and funding as a result of this project? (already agreed and/or potential)

The IIDF funded project is useful to have experiences of running co-design projects by working together with the community as well as other key stakeholders. We have applied for ethical approval for a further project to gather information from this group. The research findings will hopefully help us share this knowledge and experience to a wider academic society. More importantly, the IIDF funded project prepared me well to developing a grant proposal using co-design element to be submitted in a few weeks' time. It also helps me build confidence and experience of funding applications. I couldn't thank enough to IIDF for such a great opportunity for public engagement and for personal career development.

9. Any further information/comments?

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