Better Lives
Writing Competition
2019

#ESRCWriting
Better Lives Writing Competition 2019
Congratulations to all our finalists

Parenting with mental health
Abby Dunn, University of Sussex

Reliving trauma, relieving pain
Alessandro Massazza, University College London

Playtime in the camps
Bobby Beaumont, University of Birmingham

Tilting at windmills in a climate-changed world
Celia Robbins, University of Exeter

The illusion of eternal independence
Chloë Place, University of Sussex

Building a better life with dementia
Elyse Couch, King’s College London

This land is my land
Holly Chalcraft, Durham University

Better lives with better toilets
Ian Ross, London School of Hygiene and Tropical Medicine

Becoming a diagnosis
Lauren O’Connell, University of Essex

The psychology of flooding
Niall McLoughlin, University of Bath

Working relationships
Rosa Daiger von Gleichen, University of Oxford

Notes on a G-string
Rosie Cowan, Queen’s University Belfast

Emerging talent in social science communication
Foreword

SAGE Publishing, a leading, independent, academic and educational publisher, is a proud partner for the ESRC Writing Competition, celebrating the innovative ideas of the next generation of social scientists.

Sara Miller McCune established SAGE in 1965 to support the dissemination of usable knowledge and educate a global community. Our mission, coupled with our global advocacy for the social sciences, remains unchanged.

Despite its significant impact, the value of social science research is too often overlooked or called into question. The work carried out by social science scholars is pivotal in not only developing, but also challenging, societal norms and preconceived ideas. It facilitates progressive conversation around key issues and, when implemented and engaged with correctly, provides a crucial window to help us both see our society, and understand humanity, better.

In this belief SAGE and the ESRC are closely aligned and we are delighted to be supporting the writing competition for early career researchers. The social sciences can be an incredibly challenging field for voices, especially those early in their career, to be heard and awards such as these go a long way to both highlight creative thinking from emerging voices and underscore the important value that social science research holds. We offer our warmest congratulations to all those recognised.

Miranda Nunhofer
Vice President, Editorial Journals, SAGE Publishing
Introduction

In this, the third ESRC writing competition held in partnership with SAGE Publishing, we asked ESRC-funded PhD students to write about how their research helps people to lead better lives. Unsurprisingly there were some recurring themes of inequality, migration and mental health in the articles we saw, reflecting some of the key issues in society – but these were just a fraction of the sheer breadth of topics submitted.

There were uplifting findings, sensitive and difficult personal experiences, imaginary worlds and poignant memories; and the writers tapped in to a range of emotions and writing styles to communicate and convey their research, humanising and personalising it in the process.

Writing about research in non-academic and informal language that appeals to the general public is an important skill for all researchers to develop. It allows the reader to understand and engage with social science and appreciate the many different areas of research that impact on so many aspects of our everyday lives.

This is the first time I have been involved with the Writing Competition and I have been impressed with the quality of writing from our PhD students. I recognise how hard this makes choosing a winner from so many entries so thanks must go to the reviewers and judges who whittled the large number of entries down to this list of finalists.

This collection of the finalists’ entries is a celebration of the work and writing of researchers who have told their stories in compelling and engaging language. I hope you enjoy reading their articles as much as I have.

Professor Jennifer Rubin
Executive Chair, Economic and Social Research Council
My son rolled around on the floor kicking the door with all his might – considerable for a person less than a metre in height. At two years old he was hell-bent on ruling the family. As he exerted his will with fierce determination (to eat lollies for breakfast, to not wear shoes, to get on a train RIGHT NOW) I found myself becoming less and less measured in my responses. But I am lucky. I have a supportive partner and relatively robust mental health. What’s more, I have a good understanding of why a two-year-old might work himself up into a frenzy, and I have learned approaches to deal with it from friends, from books, from professionals. Being a parent can be wonderful, but it is also challenging. While children offer an opportunity to love, to nurture and to have fun, this can be accompanied by powerful feelings of worry, frustration and guilt. Alongside this emotional rollercoaster there may be relationship pressures and financial strains, not to mention sleeplessness. How parents navigate this is informed by their own personality, their experiences and the support they have. For parents with mental health difficulties these challenges can be even harder to manage.

“I knew I wasn’t like the other mums so I avoided them, I just ran straight home and shut the door.” (Mother, mental health services user)

Over half of mental health service users are parents. Many of these individuals will do a great job of responding to and caring for their children. For others, mental health difficulties can compromise their ability to provide responsive and nurturing care. For example, parents who struggle to manage their own anxieties may find themselves being overprotective and preventing their child from fully engaging with and exploring the world. The stigma around mental health and the fear of disclosing it can also make many parents isolated and frightened to ask for help. This places the children of parents with mental health difficulties at risk of poorer psychological and physical health, and they are more likely to develop their own mental health difficulties.

The stigma around mental health and the fear of disclosing it can make many parents isolated and frightened to ask for help.
My research is focused on exploring how mental health practitioners are engaging with and supporting their patients in being parents, and what is getting in the way of them doing that. This is important because many parents with mental health difficulties live in a world where doors feel closed to them, and these services may be the only place they access support.

“I don’t want to open up a can of worms.” (Clinical psychologist)

Mental health practitioners strongly believe that adult mental health relates to child wellbeing, according to a questionnaire I sent out to mental health practitioners working at 14 mental health trusts across England. However, this is not reflected in practice. Although the majority of practitioners routinely ask if a patient has children, less than half ask the patient how they find parenting or about their relationship with the child.

Even fewer practitioners routinely ask whether the child has emotional or behavioural difficulties, or assess the child’s needs. Despite the relationship between the challenges of parenting and dealing with mental health difficulties, only half of practitioners routinely consider the patient’s role and responsibilities as a parent when planning their care.

If mental health practitioners acknowledge the importance of the relationship between adult mental health and child outcomes, what is stopping them from engaging with parenting? It is not simply a lack of motivation, as practitioners state they want to work more with patients as parents. Lack of organisational policy has been identified as a structural barrier, but practitioners also identify workload and time pressures as playing a central role.

For many, lack of knowledge and confidence in how to engage with parents prevents them from doing so. “Opening a can of worms” is how more than one practitioner described having a conversation about parenting. They were expressing their worry that talking about a patient’s family role may lead to the identification of a need for support which they do not have the skills or resources to provide. But perhaps we should see opening a can of worms as an opportunity.

My research may appear at first sight to have uncovered a failure to support parents, with little in the way of solutions. But just as we can only understand the support a parent needs by asking them, so we can only understand how to improve the support we offer to parents in mental health services by exploring what is – and isn’t – happening, and what needs to change. If the starting point to helping parents with mental health difficulties is having a conversation, then understanding and supporting clinicians to open that door is central to helping both parent and child experience better lives.

“Opening a can of worms” is how more than one practitioner described having a conversation about parenting.
Reliving trauma, relieving pain

As a person living with my head in the clouds most of the time, I often need to double-check if I have really shut my front door, or - more worryingly for my flatmates - turned off the gas stove. People generally complain about the precariousness and inaccuracy of their memories. We forget where we parked our car yesterday evening, or the answer to a question during an exam. Some people, however, can experience the opposite problem. Rather than not remembering well enough, they remember too well.

Individuals that have survived traumatic events can experience intrusive memories. These are vivid, highly sensory, detailed memories of certain parts of the trauma that repetitively pop up in their minds uncontrollably. When experiencing such memories, people can feel as if they are re-living the traumatic event again in the here and now.

This can be a truly terrifying experience and cause a devastating amount of distress. Such memories can have a powerful grip on the lives of survivors, leading to a blurring of the trauma into everyday life, the past collapsing into the present.

The reasons behind the development of such memories are complex, but research suggests they are the result of how memory is formed during times of high arousal. More intense emotions are generally thought to result in more vivid and long-lasting memories. If I asked you what you were doing on the 13th of January 2017, most of you would struggle to remember much from that day, unless something very special happened. However, if I asked you what you were doing on the 11th of September 2001 when the Twin Towers collapsed, many of you would remember a lot more - from where you were when you witnessed the scene, to whom you were with and so on. On a more positive note, many of you might also have vivid memories of your first kiss, your wedding, or the first time you saw your child.
The reason why events that score high on emotionality tend to be remembered better makes sense from an evolutionary standpoint. You want to remember clearly where you found that tree with delicious fruits, just as much as you want to remember clearly where that very hungry tiger lives.

My research focuses specifically on the mechanisms that lie behind the development of intrusive memories. In particular, I am interested in why certain moments of a traumatic event become intrusive memories while other moments from the same trauma do not. My hypothesis is that the particular feelings, thoughts and behaviours experienced during different moments of the trauma might be key in uncovering this. Indeed, preliminary results from my research with disaster survivors suggest that the moments of the trauma that become intrusive memories are those where participants report higher levels of panic, distress, dissociation and helplessness. Reducing such feelings, thoughts, and behaviours during the trauma may therefore provide a key opportunity to prevent the development of intrusive memories. Specific training might be devised to teach techniques for reducing dissociation or panic among people that are likely to be exposed to trauma, such as soldiers and firefighters.

Another potential application is that of reducing such feelings, thoughts, and behaviours immediately after traumatic exposure. For example, nurses and doctors might be trained in techniques aimed at reducing feelings of helplessness and distress among patients arriving at A&E following potentially traumatic events such as terrorist attacks.

Memory is a fundamental aspect of how we define ourselves and our lives. As humans we have been gifted with the extraordinary capacity to travel in time, through our memories of the past. Most of us receive deep comfort from remembering that first embrace with our partner, our parents taking care of us, and smells, sounds and sights from childhood. We are naturally nostalgic creatures that spend much of our waking life wandering in our memory libraries for recollections that give us joy and meaning. We cherish our memories so much that the prospect of losing them due to illnesses such as dementia is terrifying to most of us. As societies we cling to memories through museums and monuments. As individuals we treasure important moments in photographs on our bedside table.

In a world where we are increasingly aware of the depth of mental and social suffering resulting from wars, disasters, and displacement, an improved understanding of the mechanisms behind traumatic memory is crucial. The aim of our research is not to have people forget their trauma or erase their memories in the pursuit of the ‘spotless mind’ of the ‘world forgot’ described by Alexander Pope. On the contrary, our hope is that of providing people with the ability to own their memories, rather than their memories owning them, and allowing survivors that have gone through suffering in the past to lead better lives in the future.
You glance at yourself in the security checkpoint window and smile. You like your costume; black and white stripy trousers, a freshly ironed white shirt, colourful neck scarf and cummerbund, odd stripy socks, black shoes and a bowler hat. You and your five clown colleagues are waiting for the military official to finish copying your names from your passports.

You are used to the process, yet you always feel the same sense of unease wherever you are. Today, outside a camp in Europe on the outskirts of a city; but the checkpoint, the military uniforms, the armed officers, the high fences, the barbed wire, the security cameras and humanitarian branding are constant artefacts that follow the refugee and forcibly displaced human being around the world, wherever they might be. Your unease comes from these artefacts as they are assembled together to create the refugee camp – apparently the best humanity can come up with when faced with people fleeing war or famine or natural disaster or poverty.

You take such thoughts, your unease and anger at the way of things, and store them away ready to draw upon as fuel for the work to come. Then you smile a gigantic smile as you shake the hand of the military officer and thank him for his diligence before jumping back in your van and heading up the dusty track that leads to the camp.

As you approach you pull yourself out of the window of the van. One hand clinging to the roof rack, one foot placed on the open window, your other limbs stretched out into the air and you begin to shout greetings at the top of your lungs. The other clowns join in the chorus of shouting and singing from the slow-moving vehicle, the driver beeps the horn relentlessly and within seconds the desired effect begins to take shape.

Children appear from all sides. Smiling and shouting, pointing and waving. You jump down from the vehicle and beckon the children towards you, greeting each one with
a smile, a high five, a fist bump, an ‘Oh yeah!’! In this moment you see children full of energy ready to play games, sing songs, juggle, spin plates and hula hoop.

Are these the faces of the undesirable refugees we are taught to fear and leave to die in the waters of the Mediterranean Sea? Are these the faces of the ‘swarms’ of migrants ‘invading’ Europe’s shores? If they are, you do not see it yourself.

Within seconds the other clowns have joined you and the gathering children. One holds a drum and beats an infectious rhythm, another begins to chant. The children copy, chanting and singing and dancing to the drum. You begin to move, leading a procession of clowns and children, weaving through the rows of tents and containers in which the community live. You continue to chant and sing, and the children continue to copy.

You ask for more noise, more movement, more energy. Children come running from every door, a smiling mother hands you a baby from out of a window, two men appear with more drums to add to the assembling bodies. The noise is insatiable, the noise is addictive, the noise is play manifest.

You and over one hundred children, clowns and adults gather in a clearing and form a massive circle. The children understand the circle. It is ritualised, a place to play and be safe. The barbed wire, the high fences and military personnel fade to nothing once the circle is assembled. The play circle is a symbol of unity and alliance, it is democratic, it cannot exist without each one of its members, each one holding it together and adding to its power. It cuts through the fabric of the camp - no longer a place to contain and forget about people who do not fit into our world obsessed with borders and boundaries, instead a place and a space owned by children and their right to play.

Article 31 in the United Nations Convention on the Rights of the Child states that every child has the right to engage in play. However, there are places and spaces in this world where the right to play is stripped from children; refugee camps can be one such place. My research begins with a very simple question: How can play make lives better? To answer this question, I follow, research and perform with The Flying Seagull Project, a circus and play charity valuing the psychological wellbeing of a child as equal to a child’s physical needs. Play has the power to begin to heal the wounds of war, it provides the means to begin the long journey of tackling trauma and is a battle cry against a world that forgets so many of its children.
Better Lives Writing Competition 2019

Tilting at windmills in a climate-changed world

a cold, bright November afternoon and the four turbines turn slowly in a light breeze. Poldark’s Bodmin Moor rises just to the south, but this is not the Cornwall of Sunday evening TV dramas. I’m at Delabole in the north of the county, a village known for its slate mine and for being home to the UK’s first commercial wind farm. As I turn away to start a circuit of the surrounding footpaths the blade tips look stark and white, reaching 100 metres against a clear sky.

Nothing is more urgent for our future quality of life than limiting the impacts of climate change. Switching away from fossil fuels is vital, and this is a social as well as a technical challenge. As society’s relationship to energy changes, more of us will produce, store and trade electricity in our homes and communities. One effect of this shift is that renewable energy is becoming more widely distributed throughout the landscape. More people come into daily contact with it, especially in windy, sunny places like Cornwall – and it’s a proximity that not everyone finds comfortable.

Wind turbines can become lightning rods for unease about changes. What do people see when they look at them? Are they beautiful or ugly? Will they destroy our rural heritage or protect our future? They fizz with contradiction, ciphers harbouring a multitude of meanings.

I’ve come to Delabole because my research explores these tensions and the ways they can cause conflict. Inside my academic bubble people are often surprised that wind energy encounters opposition. But in Cornwall everyone has an opinion. Wind turbines animate. They provoke. I’ve been regaled about renewable energy by a nurse while lying in Treliske hospital waiting to have a mole chopped off my toe (it was fine). An eco-minded friend left her book group in exasperation at negative...
views towards a local wind farm. In my sister’s village, someone vandalised the water supply to an old farmer’s cows because the land owner wanted to put up a turbine.

Lively anecdotes are easy to find, but my research allows me to get beyond them. My focus is on wind projects put forward by community groups. As well as the environmental benefits, ownership of renewables by a community can bring profit into an area and improve lives by supporting rural services. But there can be objections; mistrust of the scheme’s proponents, questions about who benefits or concern about visual impact on the countryside. Before starting my PhD I worked on energy policy for Cornwall Council, and I saw how these divisive conflicts could damage a community’s ability to come together to create more sustainable lives in the future.

The urgent need for more renewable energy requires us to understand these conflicts, and in recent years researchers have moved away from dismissing opponents as ‘NIMBYs’ (not in my back yard). They ask instead whether resistance to change is expressive of peoples’ concern to defend what they love about a place. This offers important insights because our sense of self is bound up with place. Emotional ties to place and the way they form part of our identity are increasingly important ideas for environmental social scientists. They apply in parts of the globe where people are displaced by the impacts of climate change, as well as in work like mine in the UK.

Previous studies suggest that people who think of the countryside as natural and unchanging react negatively to new energy infrastructure. Those strongly concerned about climate change or economic opportunity might take a different view. Little is known about how these differences play out in the case of community-owned renewable energy. My fieldwork responds to this by ‘walking and talking’; perambulatory interviews where people will show me what matters to them and how new forms of energy affect them.

Cornwall is a storied land rich with associations to industry, farming, idyllic holidays and natural beauty. It means different things to different people. As it turns to new chapters in a post-EU and climate-changing world, my work will help to decipher the role and meaning of renewable energy in the Cornish landscape. In doing so it connects to broader questions about what we value in our countryside, who has a voice, who benefits from change and how we can lead better lives in a changing environment.

As I complete my circuit around Delabole the sun dips towards the north coast and it’s nearly dusk. Starlings whizz past en route to their mass roost on Bodmin Moor. Light strikes the turbines more softly now, and they look less severe against the sky. It’s easy to see these machines through the lens of clear-cut oppositions, but in a world that seems ever more polarised, drawing out nuance and complexity feels like important work.
uenas noches”, I say for the fifteenth time, planting the last round of goodnight kisses on everyone’s cheeks. I have spent the evening with a large extended family who are taking part in my research in a small Andalusian town. Spain currently holds the crown for the highest life expectancy of any EU country, and is predicted to overtake Japan by 2040 as global leader in longevity. Yet, despite increasing use of elder-care homes across the west, Spain continues to operate on a family-based care model, with most dependent older people living at home, cared for by family.

After dinner, we all accompany the eldest family member, Carmencita, who recently celebrated her 97th birthday, down the road to her house where she lives with her youngest daughter. It has taken a long time to wish everyone goodnight. There seems to be an unwritten rule that goodnight must be spoken about for at least an hour before you actually go to bed.

This nightly ritual is quite different from my own family in Bristol, where a quick shout of ‘night’ is the most that’s expected of you. This difference in daily routine makes me reflect on relationships and the value people place on independence…

Growing up, I had always been encouraged to develop a strong sense of independence. I left home as soon as I could, went to university far away with no plans of ever returning. But what happens when this taken-for-granted independence is no longer possible? When my grandmother, who had been living alone for years after my grandfather’s death, was no longer able to live independently, she went through a series of live-in carers, before eventually we reluctantly organised her admission to a care home. She had always insisted she did not want to be a burden who was dependent on us.
UK culture places tremendous importance on cultivating independence. Thus, DE-pendency, an inevitable effect of ageing, when declining health causes us to rely increasingly more on others, destroys this highly valued independence, seeming to threaten our fundamental sense of self. But does quality of later life really depend on independence?

Perhaps it is this deep-seated fear of dependency that stimulates public health narratives, which, concerned over ageing populations, tend to utilise a kind of apocalyptic tone to describe an impending ‘ageing crisis’, threatening to overload public healthcare services with an avalanche of dependent older adults. Health promotion campaigns employ a rhetoric around ‘active ageing’ to preserve later life independence, suggesting that through exercising regularly and generally ‘keeping busy’, older adults can exert personal control to resist dependency. Yet such an approach could mean those who do find themselves dependent on others in later life feel to blame for a kind of personal failure to ‘age well’.

Yet such views of later life dependency are not universal. Anthropological research in India shows later life is considered a spiritual time when older adults must rest in preparation for death, accepting total dependence on younger relatives to attend to their every need; whilst in China, parents’ dependence on their adult children’s care in older age displays the moral strength of the family.

However, it is not simply a case of ‘the west versus the rest’, whereby western countries operate through individualism and independence, and non-western countries rely on family networks and dependency. We need not travel far from the UK to encounter cultures that approach later life dependency differently.

My research explores the experiences of people caring for older relatives in a small rural community in Andalusia. I work in a day centre for people with dementia and spend time with families who are caring for dependent older relatives.

Every morning, 97-year-old Carmencita is accompanied by her youngest daughter to her eldest daughter’s house, where she spends the day. Her grandson then walks her to her son’s home, where she and the rest of the family have dinner together before finally returning to her youngest daughter’s home to sleep. The protracted goodnight kisses between the large extended family may to me feel like a long drawn-out ritual, but could be a way the family shows and celebrates their need for one another. In this community it appears that dependency on family in later life is a sign of a better life.

Cross-cultural research into people’s experiences of ageing can uncover alternative approaches to later life dependency. As global populations shift, more countries, like the UK, are facing higher numbers of dependent older people. Rather than denying dependency and encouraging people to hold onto an illusion of eternal independence, my research questions the importance we place on independence, exploring the value of cultivating caring dependent relationships within communities. Medical science research has increased life expectancies, but now social science research must explore how people can not just lengthen their lives, but better them.
Anne’s body was tilting further and further forwards. I could see her nose getting closer to the stage in front of her, and I wasn’t the only one who had noticed. Richard Madeley and Judy Finnigan, who were on stage talking about Richard’s new book, were eyeing her nervously. Eventually, I realised that Anne was sound asleep. I jumped out of my seat at the side of the room and gently pushed her sleeping body upright in her chair. The talk carried on and Anne continued to sleep.

Anne had dementia and I was her carer. I was supporting her during an 11-day stay at the Ways with Words literary festival. Anne had been a Professor of Literature and had attended this festival for the last decade, but her dementia had progressed so much that she was no longer able to go on her own. I often took a seat out of the way; I wanted her to feel independent but also know I was there to keep her safe.

For these 11 days I lived in Anne’s world. I saw who she used to be when she attended this festival; visiting Waterstones to get to know the books of the authors whose talks she would see later that day, and then accosting them afterwards. She was no longer able to do the latter, so sent me in her place. I also saw how dementia was making this familiar place more confusing and frightening. Once, I waited outside a talk for the auditorium to empty before I went in to help her leave; when I got to her she was in tears because she thought I had forgotten her.

Overall, it was the trip of a lifetime for her, and for me. She was so delighted that she immediately started planning to go back next year. Unfortunately, Anne’s cognition and mobility declined so much that she never went back.

There are 850,000 people living with dementia in the UK; unlike Anne, most are diagnosed in the later stages of the disease. There are many people who have dementia who are not diagnosed at all, they are more likely to go into care homes or to die in hospital. The UK government wants to change this; however, despite almost a decade
of initiatives only 60% of people who have dementia actually receive a diagnosis.

Being diagnosed with dementia is devastating. There are treatments which can slow the progression of the disease, but there is no cure. Family and friends of people with dementia describe watching their loved ones fade away. The world changes when you are diagnosed, you are left behind.

It is commonly argued that diagnosing dementia early gives people access to earlier treatment and support which can keep them living well for longer; however, there is very little robust, scientific evidence to support this. In my research I am investigating this further – I want to understand the benefits of diagnosing dementia early: Is early treatment the most important thing? Does it really help people to live better for longer? Or does it help people in a way that previous researchers haven’t considered before? I think these are important questions to answer, because it is the first step in understanding how to build a better world for people living with dementia. We need to understand how to care for people with dementia, and a significant part of this is understanding when the best time is to be diagnosed.

Anne’s dementia was diagnosed early. She had the opportunity to decide how she wanted to be cared for while she still had the capacity to do so. She decided she wanted specialist dementia care to be given in her own home. This meant that when her dementia had progressed she was still able to do the things she loved, just with more support.

I want every person with dementia to have the same opportunities that Anne had; to be able to decide how they want to live their life with dementia. I hope that by understanding more clearly the benefits of an early diagnosis, my research will help people make that first step. This knowledge will not just benefit the individual, it can also be used to create a more responsive and supportive health and social care system.
Where are you from? Who are you? Where do you belong? Most of us have been asked, or asked ourselves, these questions on many occasions. But have you ever thought about how complicated answering such questions can be if you have moved from your country of birth to another country? Here I discuss my research with Greek migrants in the UK post-Brexit, to investigate ideas about belonging.

When you think about where you belong, perhaps you think of friends, family, places where you’ve lived and grown up, or the country in which you were born. Perhaps you judge belonging by your passport or citizenship, or perhaps you think that sharing a nationality creates a sense of community.

In my research I realised that many Greek people in London do not feel part of a community with other Greeks. They do not assume they will have things in common with other Greeks just because they share a national identity. My research matters because it shows that we can form relationships and belonging that are not limited by our nationality. To understand how national identity does not automatically create a sense of belonging, I want to tell you about the population exchange between Greece and Turkey in 1923.

In 1923 Muslims living in Greece were moved to Turkey, and Christians living in Turkey were moved to Greece. The nations thought that sharing a religion would foster belonging to the nation-state. However, the refugees on both sides found it hard to settle and continued to feel attached to where they had been born and raised. Shared religion did not automatically create community belonging.

The idea that nation-states should have the ‘same kinds’ of people (i.e. same religion) so that they felt a sense of community was unsuccessful in 1923. The displaced people felt that their connection to the land on which they were born and
had lived all their lives was an important part of who they were and where they felt they belonged. The effect was that Greeks who had lived in Greece before 1923 felt that they belonged in Greece more than the new arrivals, because they had been born on Greek, not Turkish, soil. They called the newcomers names and did not like their music and ‘Turkish’ habits. These distinctions between Greeks continue today.

Many of the Greek people I spoke to in London have grandparents who were displaced from Turkey to Greece in the 1923 exchange, and feel connected themselves to their ancestral lands. My research has found that Greek people feel a sense of belonging to Turkish lands because their ancestors belonged (and were buried) there. They make their grandparents’ experiences part of who they are. Ideas of belonging to specific lands is clearly a powerful and important part of identity and belonging for past and contemporary Greeks.

The Greek migrants I work with have said that friends and family in Greece have called them ‘the English one’ since they left Greece to move to London. The fact that moving away from the land where you were born and grew up changes the strength of your belonging to that place, shows that we think of belonging as linked to land. It is what makes Greek migrants in London feel neither fully Greek nor British. Sometimes this upsets them.

But does this loss of belonging to where we were born and raised have to be viewed negatively? Why do we think migrants pose such a threat? What can we gain from experiences of living in another country and meeting new people? Can we prevent our assumptions that we will be similar only to those who’ve grown up in our countries, on our lands? My research will make lives better if we all investigate the basis for our own sense of belonging to people and places and consider thinking differently.

Would you consider looking beyond where you were born and raised for the basis of belonging? Is there more to you and your relationship to nationality labels? Could you accept feeling between countries and cultures; neither fully one thing nor another? My research with Greek migrants has challenged my own ideas of belonging. My dialogue with Greek migrants living in London has allowed me to question the basis of belonging and reform it in exciting new ways.

My research can make us have better lives if we all stretch our understandings of belonging beyond ideas of nation-states, borders, and birthlands. Instead of asking ‘Where am I from?’, ‘Who am I?’, ‘Where do I belong?’, I invite you to ask ‘Where could I live?’, ‘Who could I be?’, ‘Where could I belong?’. If we embrace our possibilities for belonging, we might foster new and stronger relationships with a greater range of people and lead better lives.
Imagine not having somewhere safe to go to the toilet. Really imagine it – leaving your house and defecating behind a bush or a building. It’s hard to bend your mind to consider that, if you’ve had access to a clean, comfortable bathroom since you were a child. However, around the world, 900 million people have no option but to defecate in the open. A further 1.4 billion use a toilet that doesn’t meet World Health Organization standards for ‘basic’ toilets, meaning that it could still be a direct source of disease.

Fortunately, lots of investment is being made in sanitation in poorer countries – many billions of pounds, in fact. Right now, somewhere, a municipal official is drafting their budget and a charity worker is writing a funding proposal. There are hundreds of ways that money could be spent. However, we don’t know enough about whether money is being spent on the right programmes. Inefficient choices are certainly being made.

How can I know this? Aren’t there established economic techniques for comparing ways to spend the money? There are, but they predominantly focus on health, alongside some consideration of time savings and avoided costs. This is a problem because health is not the thing people value most about sanitation. When researchers ask people the reasons why they invested in a toilet, health is usually far down the list – concerns about privacy, safety or pride are usually at the top. Together, we can call these improvements in quality of life in general. Excluding them from economic comparisons is a glaring omission.

Economists are very concerned with what people value in their lives. We think that the highest valued changes are the most important when deciding between project A and project B. So why don’t we just measure privacy, safety etc., and plug that into the economic models alongside health?
The challenge is that these things are not easily measured – they are subjective perceptions and vary from person to person. There’s also the problem of how to select the different elements, and then the problem of weighting them.

These problems are not insurmountable – such quality of life measures exist for comparing programmes in health or social care. For example, the NHS in the UK makes huge funding decisions based on ‘quality-adjusted life years’. This measure takes account of how people value changes in health, by weighting life years with a ‘health-related quality of life’ scale. However, nobody has yet developed one for sanitation programmes.

That’s where my research comes in. I’m working on a measure for sanitation-related quality of life, building on the experience of health. The challenge is to measure this by asking people less than 10 questions, so it is manageable for regular use. The questions need to reflect what people value most about having a toilet.

Quality of life measures exist for comparing programmes in health or social care. ... nobody has yet developed one for sanitation programmes.

My work is based in Mozambique which is one of the poorest countries in the world. In collaboration with a local research team, we started by interviewing people living in slum settlements in the capital city, Maputo, both on their own and in groups. These were ordinary men and women, young and old. They all used different kinds of toilets, some good, some terrible.

First we asked them what was important for a good life – people often mentioned having enough food, having a good house, and having happy children. Then we asked about how a good toilet or bad toilet contributed to each of those things. Many interesting and important stories emerged, some happy, some sad. One young woman talked about privacy: “Anyone that passes can peep at you if you are going to urinate or defecate.” An older man talked about no longer feeling embarrassment when entertaining relatives: “When visitors come to see us now, they won’t feel bad when entering the toilet”.

By systematically analysing these conversations, I identified a list of issues that kept coming up. The list of issues was too long, so I narrowed it down by showing people sets of three options and asking them to choose which was the most important. By doing this lots of times with many people, it is possible to exclude the least important items, and use statistical techniques to develop weights for those that are left.

So how will this improve people’s lives? My measure of sanitation-related quality of life can be used to compare different investment options. It can be used by the municipal planners deciding where the billions of pounds are spent. Through using it, they can know which types of investments improve quality of life the most, by focusing on what people value about sanitation. Considered alongside data on costs, health and engineering, this can make for more efficient use of public funds. That means more people using a toilet which makes them proud, safe and comfortable.
20 years old, four years after I first began dieting, I sought help from a counsellor at a local eating disorder charity. I was a third-year undergraduate living in a student house, and recently my ‘successful’ dieting had been interrupted by a pattern of binge-eating that I struggled to control. I knew my dieting was quite extreme, and I had started to hide its extent from others. I also knew that I was teetering on the edge of being a little too thin.

But I didn’t think of myself as having a ‘proper’ eating disorder. Proper eating disorders were for the girls I read about in magazines who were emaciated and unable to eat. Girls with feeding tubes who deceived their doctors, hid peas under their fork and secretly vomited into plant pots. Eating disorders weren’t for me. But my binge eating, a fear of weight gain, and the great sense of personal failure and shame that came with it, distressed me greatly. I saw the counsellor and explained my eating habits and my concerns that I was developing bulimia, only without the vomiting.

The counsellor suggested that perhaps it wasn’t bulimia I was experiencing, but anorexia. I was surprised. Me, anorexic? I didn’t consider myself thin enough and I definitely liked food too much. I didn’t have the audacity to dare call myself ‘anorexic’, yet I was immediately drawn to the idea. The word felt exhilarating and serious. It took me seriously.

When a medical professional diagnoses someone with anorexia nervosa, the intention is to help. The diagnosis is supposed to assist in better understanding the nature of the individual’s struggles and in providing access to treatment. A diagnosis can therefore feel like a relief to the person who receives it. It can help them to make sense of their experiences, validate and legitimise suffering and offer a point of connection with other ‘sufferers’.
But being diagnosed with anorexia can be problematic, too. The pathology implied by the diagnosis – the sense that there is something wrong with oneself – may lead to feelings of personal shame and social stigma or perpetuate hopelessness. Individuals also sometimes try to ‘hang on’ to the diagnosis through continued weight loss, in order to not lose access to treatment or in hope of retaining the private sense of achievement that it can provide.

For me, the diagnosis powerfully impacted on my sense of who I was and where I belonged in the world. During repeated in-patient admissions where I increasingly distanced myself from my normal daily life and social roles, ‘anorexic’ became a viable alternative that I, to some extent, deliberately sought. The diagnosis acted as a blueprint for who I could become, and this had serious implications for my eating-related distress and how I engaged with treatment. In the long run, it contributed to the prolonging of my struggles.

Of course, many people who are diagnosed with anorexia do not turn out to have experiences like mine. The diagnosis will mean different things to different people, depending on (for example) the circumstances in which they are diagnosed and their understanding of what it means. For many, however, a diagnosis of anorexia can be a significant influence on their identity, because it suggests that they are essentially sick, different and irrational.

My research addresses personal experiences of being diagnosed with anorexia. I am exploring what having a diagnosis means to people, and how they understand and relate to their diagnosis in treatment and beyond. I am interested in how the diagnosis influences their identity, and in turn affects their experience of ‘illness’ and ‘recovery’. Recovering from anorexia involves working at identity; one must let go of an identity that is embedded in a particular clinical disorder, and recreate and negotiate it as someone who is ‘well’. This can be a challenging process which many experience as a personal loss. As part of my research, I am seeking to understand how individuals who are navigating this process make sense of, and draw upon, their diagnosis.

The overall aim is to shed light on what the psychiatric diagnosis of anorexia does, and the role it plays in experiences of eating-related distress. This has potential to improve the lives of those living with eating-related distress by better understanding the impact of the diagnostic interventions that are intended to help them. This is important, given the limited success of current clinical interventions. Anorexia is associated with high rates of treatment drop-out and relapse, and as the recent NICE guidelines for the treatment of eating disorders suggest, no specific treatment programme for anorexia in adults demonstrates sustained long-term benefits. There is therefore a need to better understand how clinical procedures – including the act of diagnosis itself – affect the individual and their experience of treatment and recovery.
I’m lucky enough to have grown up near the Lake District, a beautiful, wild and rugged part of the country. Spending weekends hiking with my family in the Cumbrian fells truly inspired me to study how people connect with the natural environment. But when I was embarking on my PhD, and trying to decide exactly what to focus on, nothing prepared me for what would happen in the winter of 2015.

Cumbria was completely devastated by a major flooding event – the kind we have never really seen before. A new national 24-hour rainfall record was set at one of the region’s rain gauges, and all the major rivers in the county exceeded their historic levels. The flow of water in the river Eden, for instance, was so great that it could have filled the Royal Albert Hall in less than a minute.

Thousands of homes were devastated across Cumbria and other northern counties.

Seeing this unfold, I was compelled to focus my PhD research around understanding people’s experiences of these sorts of events; to figure out what can be done from a perspective of psychology, where the focus is on personal perspectives.

How did flood victims make sense of what happened? In what ways did people cope? And what future did they see for their communities?

Carrying out interviews and surveys was eye-opening. What I found was that Cumbrians were experiencing an array of ‘psychological threats’ in the aftermath. One participant explained how the prospect of moving away and not belonging to her local community would be worse than being flooded again and again.

One interviewee explained that despite all the damage, the hardest part was throwing the teddy bear she’d had since she was a child into a skip; while another participant likened the experience to a ‘bereavement’. Flooding poses a threat to its victims’ sense of continuity, as individuals lose a part of their lives to the floodwaters.
The flooding also threatened people’s sense of belonging, posing complex dilemmas. One participant explained how the prospect of moving away and not belonging to her local community would be worse than being flooded again and again.

With so much at stake, it’s no wonder that the trauma of flooding can leave those affected with serious mental health issues.

But crucially, people also felt threatened by the way the authorities handled the situation and the way they had been engaged with. The flood victims explained how they felt they had no control over their situation, and needed to be able to stand on their own two feet in the face of future flooding. Psychologically speaking, the way communities were being engaged with was posing a threat to their sense of efficacy to take the actions they wanted. In other words, flood victims’ ability to cope was being jeopardised.

Scientists have already confirmed that climate change has started to re-shape flood events in the UK, and we know it’s going to get worse. We face a range of climate impacts on our shores, but flooding is expected to be the greatest risk.

It is therefore a pressing concern to figure out how to engage with the public appropriately around this issue. Understanding how people cope with flooding also holds clues for the ways that people will respond to other impacts of climate change, like coastal erosion, health risks from higher temperatures, and water shortages.

The Environment Secretary, Michael Gove, recently warned that not every home can be saved from climate impacts, and that some people will need to be relocated. In the coastal community of Fairbourne in Wales, for instance, plans are already being made to ‘decommission’ an entire village due to the threat of sea level rise.

However, public engagement with climate impacts gets little attention compared to efforts about reducing environmental footprints (like recycling, eating less meat, or using sustainable transport); and government funding for impacts-based engagement is currently insufficient for the challenges ahead.

My research is helping us to understand the real problems that people are facing on the frontlines of climate change, and unpicks the ways that engagement could be improved.

Whilst on placement at Climate Outreach, Europe’s leading climate change communications organisation, I have been involved in new research that brings together the recommendations of around 200 climate communication specialists. What we found was a clear mandate for nurturing efficacy and empowerment to respond to climate change, through engagement that puts dialogue and participation at its heart.

I’m now looking at ways to work with members of the public, to help people share their stories about flooding through participatory, creative engagement methods.

By understanding the ways people experience and cope with the threat of living in communities on the frontlines of climate change, we can learn how to carry out public engagement more effectively; and through this, help people in these communities to have better lives.
had a baby last year. My first, a beautiful little boy named Johann. I was prepared for many of the changes, or at least as prepared as you can be for something you’ve never done before. The sleepless nights, the emotional roller coaster, renegotiating responsibilities with my husband. What I wasn’t prepared for were all the stories. Johann’s arrival was the occasion for my mother, father and grandmothers to tell me about their experiences being parents in the 20th century. And of course many of the stories were funny and beautiful. But the most memorable ones were not.

One grandmother would have loved to work, but that was considered socially inappropriate. Had she been working, it would have suggested that my grandfather wasn’t a good breadwinner. In the rigid society of the 1950s, my grandfather also struggled to show affection for his children. This emotional distance contributed to pain that is still felt in my family today. My other grandmother would have loved to stay home with her children, but on that side of the family it was simply unaffordable.

For all my grandparents, having children and earning a living in a male breadwinning and female caregiving society produced painful regrets. But those didn’t stop with my grandparents’ generation. My parents too struggled to earn enough and do work they loved, while spending enough time with me. Of course the challenge was different for my mother than for my father. She would have needed more support with childcare, while he would have loved to work less and spend more time with me. While this meant that I got to spend a lot of time with my beloved grandmothers, I remember wishing I could have spent more time with my parents.

Behind the phrase ‘work-family conflict’ is a wealth of stories like those in my family – stories of regret, broken relationships, and unfulfilled potential.
by class. Many working parents still feel too constrained in their relationships with family members, particularly fathers, or their career prospects, particularly mothers.

Parents’ (and often therefore children’s) lives will be better if they can build the careers and families they imagine for themselves with fewer gender and class constraints. That’s why my research explores questions such as where support for working families comes from, why some policies – like child benefits, paid leave, or childcare – are preferred over others, and how these policies work together. I’m also studying how different policies help or hinder different families, such as single-parent households or low-income families, in their work-family balance.

In particular, my research focuses on employers’ support for working parents. So far social science has neglected the role of employers, and why they offer things like company day care or additional paid leave. I’m particularly interested in how much work-family policies of national governments influence the work-family measures of employers. This is also a relatively new area of social research where a better understanding would make it much easier to draft government policies that improve people’s lives.

You might think that the more work-family policies governments offer, the less employers will provide – but generally this does not seem to be the case. This is the norm for most working families, but I’m convinced that it doesn’t need to be this way. That’s why I’m researching how and why governments and employers support working parents. I believe this knowledge is crucial to crafting better work-family policies. And good work-family policies can help many millions, both parents and children, have stronger relationships, more fulfilling careers, and ultimately better lives.

In many ways, being a working mum in 2018 is easier than it was in 1990 or 1960. My husband took six months of paternity leave through his employer when Johann was born, and as I write these lines, the sixteen-month-old is at public day care. But while things are unquestionably better today than they were for previous generations, balancing work and family remains much more difficult than it should be. Childcare for Johann is only available and affordable for a few hours a day, and my husband is back to working long hours, usually coming home long after Johann has gone to bed.
Notes on a G-string

An item of underwear recently made headline news in the Republic of Ireland. The lacy thong was produced in a Cork courtroom, where a female defence barrister declared it proof that a 17-year-old rape complainant was ‘up for it’ – keen to have sex on the night in question. The jury of eight men and four women took just under an hour to acquit the 27-year-old defendant.

In Belfast, where I live, the young woman at the centre of the infamous Ulster rugby trial suffered similar indignity, when her bloodstained lingerie was passed around for jury inspection during her eight days in the witness box. The four accused were all found not guilty. A few years ago, in a Glasgow court, another young complainant was forced to hold up her pants, which bore the legend ‘Little Devil’. That defendant was convicted, but two weeks after the trial his victim took her own life.

I was a crime journalist for a London-based national newspaper before I returned to university to study law, and these were depressingly familiar stories. I covered several rape trials where defence counsel verbally savaged a complainant, almost invariably female; for although men account for around a sixth of those raped in the UK, they are even more reluctant to report it than women.

Lack of injury, failure to put up a fight, or any delay whatsoever in going to the police were treated as grounds for suspicion that the complainant was lying. Every facet of her character and behaviour was dissected in excruciating detail – her sexual history, her alcohol consumption, how she flirted with the defendant, her underwear; even though clothing rarely yields any useful forensic evidence in rape cases, which usually hinge on consent. It frequently felt like she was the one on trial, not the defendant.
It got me wondering what jurors really make of all this. Here in the UK, as in the Republic of Ireland, juries do not give reasons for their verdicts, nor are they allowed to ever reveal anything of their deliberations. Defence lawyers persist in trying to tap into false beliefs about rape that surveys confirm are widespread – yet they avoid censure for these tactics because we cannot say to what extent rape myths may have swayed any jury, how they weigh up other evidence presented in the case, and how, or if, they understand the meaning of consent and reasonable doubt.

Rape statistics are startling the world over. In England and Wales, 3.4 million (20%) of women and 631,000 (4%) of men have been raped at some point in their adult lives. According to the latest annual figures, an estimated 650,000 adults were raped or sexually assaulted in England and Wales, and around 6,000 in Northern Ireland. Yet only one in six went to the police, mainly through fear of having to endure the humiliating courtroom ordeals we read or hear about in the news.

The secrets of the jury room fascinate me, as does the psychology of how certain individuals impact group decision-making. I still remember willing Henry Fonda on when, as a child, I first saw him talk his 11 jaded fellow jurors out of convicting a teenage boy of murder in *12 Angry Men*. Studying for my Master’s degree I read the work of legal academics who set up simulated jury panels and staged fictional mini-rape trials for them to observe, to examine how feelings about rape are formed and swayed by debate. This type of experiment has been carried out in England and Wales but never in Northern Ireland. Yet only one in six went to the police, mainly through fear of having to endure the humiliating courtroom ordeals we read or hear about in the news.

When I submitted my PhD proposal, which involves using mock juries to investigate attitudes to rape in Northern Ireland, the #MeToo movement was gaining global momentum, while at home the Ulster rugby trial viciously divided local opinion in a way I’d never witnessed any previous rape trial do. Its conclusion brought protestors to the streets, and it was announced that retired judge Sir John Gillen would review sexual offences trials here.

Judge Gillen has already acknowledged that prejudices about rape must be tackled. Society will not change overnight, and to formulate any policy or education programme we need evidence to demonstrate how rape myths affect jury decision-making. If my research can make even the tiniest contribution to bringing about a criminal justice system where rape complainants’ choice of underwear is no longer literally cast up as evidence against them, it will be well worth the effort.
Judging panel

Miranda Nunhofer
Vice President, Editorial Journals, SAGE Publishing

Joining SAGE Publishing in 1995, Miranda has worked in journals publishing for over 20 years. Her career has included work in a variety of roles within the editorial department, including as a Commissioning Editor for criminology books and journals. As Vice President for SAGE’s journals programme, Miranda has overall responsibility for the growth and development strategy for a big portfolio of Humanities and Social Science (HSS), and Science, Technology and Medicine (STM) titles. Since 2018, Miranda has also been leading on a stream in the SAGE Impact project to investigate alternative metrics for assessing research impact for social scientists.

@mnunhofer

Hannah Devlin
Science Correspondent, the Guardian

Hannah is the Guardian’s science correspondent. She was science editor at the Times before moving to the Guardian and prior to that worked at Research Fortnight. She has a PhD in biomedical imaging from the University of Oxford and presents the Science Weekly podcast. She won the Association of British Science Writers Investigative Journalism Prize in 2018 and is shortlisted for the 2019 National Press Awards as Science Journalist of the Year.

@hannahdev

Shamit Saggar
Director of the Public Policy Institute, University of Western Australia

Shamit recently joined the newly-formed Public Policy Institute at the University of Western Australia as Director. He was previously at the Institute for Social and Economic Research at the University of Essex and has also held academic appointments at Sussex, Queen Mary, UCLA, Yale and Toronto. In 2015 he was elected as a Fellow of the Academy of Social Sciences. He was appointed CBE for services to social science and public policy in 2017, reflecting his leadership roles in the regulatory, legal, financial and non-profit sectors. He was Chair of the Campaign for Social Science between September 2017 and February 2019, championing the use of research to help make policy and practice more evidence-based.

Melinda Mills
ESRC Council member, Head of the Department of Sociology, University of Oxford

Melinda is the Nuffield Professor of Sociology at Nuffield College and Head of the Department of Sociology at the University of Oxford. In 2018 she was appointed MBE and also elected as Fellow of the British Academy in recognition of her achievements in the social sciences. She has been a member of ESRC Council since 2017. From 2012 to 2016 she was Editor-in-Chief of the European Sociological Review and has published books on uncertainty, globalisation and the life course. Her research spans interdisciplinary topics at the intersection of demography, sociology, molecular genetics and statistics.

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