



## Equality, Diversity and Inclusion Strategy - Action Plan Statement of Intent – September 2024

**Theme:** Depression Therapeutics

**The Depression Therapeutics Theme uses primarily human models of antidepressant action to help bridge the translational gap between pre-clinical animal models and clinical trials, fast-tracking research into novel treatments (or combinations of treatments) for depression. Depression is a leading cause of disability across the whole population, but is even more prevalent in marginalised groups, so our theme is dedicated to working with and involving people from marginalised groups (in our workforce, our research participants, and our PPIEP) to ensure our research is relevant to their needs and experiences.**

### Partnerships

Working with Birmingham and Solihull Mental Health Trust will allow us to increase access to our experimental medicine studies and increase the geographical, socio-economic and ethnic diversity in our workforce, research participants and PPIEP. We have established a training and travel budget for staff members in Birmingham, to allow effective partnership. In 2023-2024, colleagues from Birmingham attended a BRC wide EDI/PPIEP workshop in Oxford and spoke at our theme Away Day.

### Diverse PPIEP

For each component of the PPIEP embedded within each work-package and across our theme PPIEP strategy, we are recruiting a diverse range of people with lived experience of depression. Our Theme Project Manager and PPIEP lead (Dr Amy Gillespie) will ensure we work with the BRC PPIEP Core team and Diversity in Research Group to implement their guidance on improving diversity in PPIEP for the theme – e.g. through engagement with local community organisations, publicising relevant staff training, and producing clear and accessible materials. This will help ensure diversity is considered throughout the research cycle, from research question development to impact and dissemination. PPIEP will also be used to update and expand our theme-wide SOPs and guidance for researchers (initially created in BRC1), including areas such as recruitment strategies, ethics applications and choice of outcome assessments. This PPIEP will feed into:

- Specialist mood disorder clinics – Diversity will be a priority when using PPIEP to optimise the pathways into mood disorder clinics referral (in Oxford and Birmingham), as a key way to expand patient access to experimental medicine

studies. We have staff in post to harmonise procedures across clinics and consider factors that might help lead to equitable experience and access

- The new Treatment-resistant depression (TRD) patient advisory group (PAG) is led by Mary Wilson and linked to the TRD mood disorder clinic. 20% of the members identify as Black, Black British, Caribbean or African, and 40% identify as LGBTQ+.
- Young Person's Advisory Group (YPAG) – This YPAG will have particularly significant impact on the research of work-package 4, with an extended project guiding the research priorities and methodology of studies investigating improvement of treatments for depression in young people. We have invested careful thought, and resources, into appropriate outreach for forming a diverse and representative YPAG. 90% of the member had no previous experience with PPI, 25% of the members identify as South Asian, African, Arab, or Mixed ethnicity, and members have a range of experiences of antidepressants and comorbid conditions. In early sessions, they have already provided useful direction on how to consider neurodiversity when developing/selecting cognitive tasks
- Research priorities and methodology – Across all work packages, diverse PPIEP will be involved in identifying research and treatment priorities and developing and validating appropriate models and paradigms in our experimental medicine studies. We will also reduce barriers to participations e.g., we now have vegan, egg-free and halal-friendly capsules as default (with changes made on a case-by-case basis, as required). We will also review our study screening procedures to ensure our questions are appropriate and sensitive to issues around ethnicity, sexuality, mental health status etc.

#### Inclusive Participant Information Sheets

We have initiated a project with our theme PPI group to develop theme-specific examples of shorter, visual, easy-to-read participant information sheets. This will facilitate more inclusive recruitment and help achieve more diverse participant populations in our experimental medicine studies.

#### Online platforms for experimental medicine studies

We will continue to expand our provision of fully remote experimental medicine studies, to enable people to participate in our studies without having to attend visits in Oxford. A previous example of this is OxSTEP, an innovative pharmacological study assessing the cognitive effects of statin use in an at-risk group, conducted fully remotely with video medical screenings and medication and saliva kits posted to participants. This allowed great geographical diversity and reduced time and travel burden on participants, allowing a great diversity of age, socio-economic status and working pattern. Similarly, in late 2022 the PAX-D study – one of our largest clinical trials - amended their protocol to safely introduce

additional flexibility and offer participants assessments remotely wherever possible. We will also continue to program and develop online versions of our cognitive task batteries for collaborators to use internationally, while maintaining standardisation of methodology. For example, in the last year our online ETB was used in research in Manchester and Toronto.

### Workplace Culture

A healthy and supportive research culture is important for all members of staff, but can be particularly important for staff from marginalised groups, including ensuring equity of support, career progression etc. Our Theme Lead (Professor Catherine Harmer) is Associate Head of People and Culture in the Department of Psychiatry in Oxford, and core theme staff are members of/chairs of various people and culture committees (mental well-being, race equality), and/or are Bullying and Harassment advisors for the department. We have led departmental initiatives to introduce lab handbooks (which promote positive research culture through transparency of norms and expectations), make bullying and harassment advisors more visible within the department, develop action plans for race equality in the department, and coordinate reflective practice for PIs (who are key to spreading positive workplace culture). Staff within our theme are dedicated to improving workplace culture for everyone, will attend EDI relevant training (e.g. MSD Inclusive Leadership programme), and will continue to champion departmental EDI initiatives such as trialing more inclusive hiring practices and developing targeted mentorship schemes.

### Career Progression

A key challenge for diversity in the workplace is the “leaky pipeline”, with staff from marginalised groups facing barriers to career progression. In all our initiatives to provide career progression opportunities, often aimed at early career researchers – training opportunities, access to competitive pump-priming, career development fellowships, DPhil studentships etc. We will ensure our practices are inclusive and supportive of applicants from marginalised groups, with transparent processes and wide dissemination of all opportunities. This will include monitoring of our Pump Priming awards going forward.

Not only do we support career progression within our own department, we also believe scientists from marginalised groups across the world should have access to these opportunities. One of our core team members (Dr Marieke Martens) is therefore one of the organisers of the WIN Global Scholars (WINGS) programme, part of WIN (Wellcome Centre for Integrative Neuroimaging). The WINGS programme aims to build links between WIN and MRI researchers in the Global South. All WIN Global Scholars are affiliated with WIN for one year whilst continuing their research projects at their current institution. They interact with WIN researchers by virtually joining research meetings and receive a range of training opportunities (such as the MRI Graduate Course). With this, scholars learn new analysis techniques, extend their professional network and, in some cases, may foster new collaborations with WIN researchers that continue past their one-year affiliation. Crucially,

they transfer the knowledge and skills they acquire to their local research environment by sharing their experiences and training other members of their institutions.

### Monitoring

We will regularly discuss EDI at monthly meetings of core theme staff, to identify opportunities for increasing inclusivity and diversity across our work packages. Where possible, and dependent on appropriate governance procedures, we will (in alignment with BRC-wide strategy and guidance) collect data on the nine NIHR protected characteristics and Indices of multiple deprivation (as used by UCAS) for our workforce, our research participants, and our PPIEP. This will allow us to monitor the diversity across the theme and identify areas for improvement.

In line with the Mental Health Mission Mood Disorder network requirements, the Treatment Resistant Depression clinic now collects summary deprivation index scores (derived from postcodes) of referrals on an annual basis, with an aim to increase the number of patients referred from more deprived local areas over time. The TRD clinic is also developing a cohort study that patients of the clinic can consent to join. This will include capturing sociodemographic data using the NIHR diversity data questions. The protocol/ethics application for this cohort study is under development.

### Communication and dissemination

We will capture and share best practice exemplars across the BRC, as well as opportunities for learning. We will disseminate information and opportunities related to EDI in our communications across the Depression Therapeutics Theme – this includes monthly newsletters to work package leads, work-package meetings and whole theme Away Days. We will also engage in reciprocal learning regarding PPIEP with our external collaborators, sharing our examples of best practice and learning from other institutions and organisations.