PhD GTA Projects in Psychology

*See further details by selecting title

Cognition and Behaviour:

1. Characterising memory loss in autoimmune limbic encephalitis: Dr Kata Pauly-Takacs (Director of Studies), Dr Sarah Smith, Dr Steven Kemp and Dr Rumana Chowdhury

2. Listening to your heart: Exploring the link between bodily sensations and emotion regulation across the lifespan: Dr Gaby Pfeifer (Director of Studies) and Dr Kata Pauly-Takacs

3. Drug addiction: Exploring underlying risk factors for drug maintenance and relapse: Dr Danielle Selby, Dr Zoe Kolokotroni and Dr Therese Fozard

4. The Perceptual Control of Coordinated Rhythmic Movements: Dr Andrew D Wilson (DoS)

5. Aesthetic Experience across Classical & Contemporary Metrics: Professor Anna Abraham and Dr Lydia Windisch (Director of Studies)

Health and Clinical Psychology:

1. Understanding the experiences of trying to conceive for women with no known fertility problems: Dr Kirsty Budds (Director of Studies) and Professor Georgina Jones

2. Exploring factors involved in the development of suicide ideation in patients experiencing cancer: Dr Trish Holch, Dr Katie Dhingra and Dr Kate Absolom

3. Understanding the impact upon decision-making, quality of life, and family dynamics in young people with a primary immune deficiency as they transition from paediatric to adult services: Professor Georgina Jones (Director of Studies) and Dr Trish Holch

4. Domestic violence and abuse during pregnancy: Assessing victim-survivors’ experiences and their healthcare needs: Dr Tamara Turner-Moore (Director of Studies) and Professor Georgina Jones

5. Donor and Recipient Experiences of Known Sperm Donation: Dr Nina Martin (Director of Studies), Professor Georgina Jones, Dr Tamara Turner-Moore

6. Male infertility: a canary in the coal mine: Dr Laura Ashley (Director of Studies), Professor Georgina Jones, Professor Brendan Gough, Professor Allan Pacey

7. Investigating mindfulness and relaxation techniques for stroke survivors and their carers: Dr Suzie Xu Wang (Director of Studies), Professor Georgina Jones and Dr Laura Ashley
Speech and Language:

1. Communication post total laryngectomy: what factors influence listener judgements in relation to the method of communication achieved?: Dr Sarah James (Director of Studies) and Dr Anne Hurren

2. Investigating writing interventions and predictors of recovery in traumatic brain injury: Dr Sarah James (Director of Studies) and Dr Lindsey Thiel

PASH (Psychology Applied to Safety and Health)

1. Accident Prevention at Work! The Role of Usability Perceptions of Safety Systems, Technologies and Procedures In Supporting Safety Compliance in The Workplace: Dr Matteo Curcuruto and Dr Jim Morgan

Gender and Sexualities:

1. Sexism and racism in Psychology curricula: Analysing institutional 'talk' & curricula: Dr Glen Jankowski (Director of Studies), Dr Neda Mahmoodi and Dr Ellie Willard

2. Gas lighting hair loss pain: An applied, mixed methods project: Dr Neda Mahmoodi (Director of Studies) and Dr Glen Jankowski

3. Exploring critical, liberatory and/or community-based approaches to RSE on sexual bullying: Dr Kate Milnes, Dr Tom Muskett and Dr Tamara Turner-Moore

4. Gender, Class and taking up space and playing with in/visibilities: Dr Bridgette Rickett and Professor Jane Raisborough

5. Gendering and Classing the Imagining of Belonging in UK Higher Education: Dr Bridgette Rickett and Dr Jessica Drakett

Details of Projects Available

**Email Director of Studies for further informal discussion by selecting their name**
Cognition and Behaviour

1. Characterising memory loss in autoimmune limbic encephalitis: Dr Kata Pauly-Takacs (Director of Studies), Dr Sarah Smith, Dr Steven Kemp and Dr Rumana Chowdhury

Project Summary: Autoimmune limbic encephalitis is a rare inflammatory disorder often characterised by long-term memory problems following medical recovery. Depending on illness characteristics these memory problems can be relatively mild during routine neuropsychological assessment despite subjective complaints and significant impact on day-to-day functioning and quality of life. Such discrepancies between clinical tools and patients' subjective experience of their memory highlight the inadequacy of standardised tests to characterise the nature of memory problems in this emerging clinical population. Indeed, some of the memory problems observed in these patients have been associated with accelerated long-term forgetting (ALF), a phenomenon often seen in temporal lobe epilepsy, but testing of which is currently outside of routine neuropsychological assessment.

The primary aim of this exciting PhD project will be to characterise memory loss in limbic encephalitis through the development of experimental protocols which take the patients' experience and subjective complaints into account. With consideration of ALF, the project will contribute to current developments in the measurement and associated debates regarding this clinically relevant, but under-researched memory phenomenon. From a theoretical perspective, this patient group provides a unique opportunity to gain insight into the fractionation of long-term memory systems where objectively measurable aspects of memory may dissociate from the subjective experience of remembering. Such fine-grained and theoretically motivated assessments will contribute to a better understanding of the nature of memory problems in limbic encephalitis, ultimately paving the way to address the neuropsychological rehabilitation needs of this clinical population.

The project will employ contemporary experimental neuropsychological methodologies appropriate for small clinical samples (e.g. matched pair design, single-case series) alongside standardised tools of neuropsychological assessment. The successful candidate will have the opportunity to work with a team of academics and clinicians specialising in cognitive neurology or cognitive neuropsychology.

Recommended Reading


Cognition and Behaviour

2. Listening to your heart: Exploring the link between bodily sensations and emotion regulation across the lifespan: Dr Gaby Pfeifer (Director of Studies) and Dr Kata Pauly-Takacs

Project Summary: Our ability to listen to the internal milieu of our body is called interoception: Interoception involves feeling our heart rate, gastro-intestinal functions, breathing, detecting whether we are hungry or thirsty, sexual desire, and other bodily needs. Interoception is thought to underpin the subjective experience of emotions, making it an important mechanism through which we regulate the way we feel. Previous work with young adults has shown that high interoceptive sensitivity is related to increased fear processing and memory (Pfeifer et al., 2017). As people get older, they improve their emotion regulation skills and tend to experience and remember more positive than negative emotions (Charles et al., 2003). Although various cognitive theories aim to explain the positivity effect in aging, a biological explanation via age-related changes in interoceptive sensitivity has not been established. Yet, recent evidence suggests that interoception declines with age (Murphy et al., 2018), corroborating a potential link between internal bodily sensations (interoception) and emotion regulation in older adults.

In the proposed project, the student will systematically examine young and older adults’ interoceptive sensitivity (using questionnaires and heartbeat tracking tasks), take cardiac measures, administer neuropsychological tests and carry out experimental emotional processing and memory tasks. The findings might open novel treatment avenues for anxiety and stress by exploring people’s interoceptive sensitivity across the lifespan.

Aims of the project:

- To characterise the influence of age-related interoceptive decline on emotional processing and memory.

- To examine multidimensional influences of interoception (using questionnaires as well as experimental heart beat tracking tasks) and personality effects (e.g. anxiety, neuroticism) on emotional processing and memory.

The project would suit a student with an interest in the mind-body relationship underlying cognition and emotion and the associated changes across the lifespan. You will acquire experimental research, advanced analytic and programming skills. Moreover, you will develop neuropsychological testing and communication skills through extensive interaction with individuals of various ages (e.g. responding sensitively to older individual’s concerns regarding their emotions and memory) during recruitment, testing and dissemination of findings. Recommended Reading

Recommended Reading


Cognition and Behaviour

3. Drug addiction: Exploring underlying risk factors for drug maintenance and relapse: Dr Danielle Selby, Dr Zoe Kolokotroni and Dr Therese Fozard

Project Summary: Drug addiction is very costly, leading to significant harm at both the individual and societal level. With approximately 35 million problem drug users in the world, addiction is a global epidemic and there continues to be an enormous unmet need for prevention, and treatment (United Nations Office on Drugs & Crime, World Drug report 2019). In order to prevent and/or treat this disorder it is critical to further our understanding of the risk factors involved in the initiation, maintenance and relapse to drug use. Formulations of drug addiction propose that heightened impulsivity, pathological craving and biases in attention are major factors influencing the cycle of addiction across drugs of abuse.

This PhD will take a bio-psychological approach to explore how varying dimensions of impulsivity, craving, and attentional bias may independently or interactively predict loss of control over drug-seeking and taking behaviour. Candidates will be encouraged to employ a multi-methodological approach using for example questionnaires, computerised cognitive tasks and physiological measures, including eye-tracking technology and transcranial direct current stimulation (tDCS) in order to assess and manipulate different aspects of impulsive behaviour, cue sensitivity and attentional bias. Research will be conducted both in the laboratory and in the field adopting ecological momentary assessment methodology and smartphone applications.

Recommended Reading


Cognition and Behaviour

4. *The Perceptual Control of Coordinated Rhythmic Movements: Dr Andrew D Wilson (DoS)*

**Project Summary:** Skilled movements require learning to perceive task demands, and organising your actions to meet those demands. I use coordinated rhythmic movements as a model task in the lab to study the processes of skill acquisition and performance. While simple, these movements still require all the elements of more complex tasks, but within a task that is simple enough to study and model in detail.

The basic task asks participants to move joysticks in various coordinations (e.g. doing the same thing at the same time, called 0° relative phase). I can then measure how stable their movements are in response to experimental manipulations (e.g. how the stability of a tricky coordination such as 90° relative phase improves with learning). I can also have participants view coordination displays to test their visual perception of the coordination.

So far, my colleagues and I have identified the visual information most people use to control their actions, mapped how this changes with learning, and investigated how eye movements change over time to support detection of the information. This project will continue to expand this project along the following lines

1. Learning more difficult rhythms entails switching visual information variables (from relative direction of motion to relative position of the movements). We have recently found that some people actually come to the lab already using relative position; this project would map out how common this is, and what the consequences are for skilled performance and learning.

2. All our work so far has focused on visual perception, with one exception (Wilson et al. 2003). We currently believe that the haptic perception of relative phase works with the same variables as vision. However, there are critical differences between the visual and haptic systems that will affect exactly how these variables are used. This part of the project would develop the haptic perception side of the story.

This project would suit a student with a background in sports science or experimental cognitive psychology, and an interest in perception-action and the ecological approach. You will be trained in programming (primarily Matlab), experimental techniques in cognitive psychology, a variety of statistical techniques and kinematic data analysis. Prior programming experience would be a benefit.

The Cognition in Action lab is committed to open science and reproducibility. We preprint work on psyarxiv.com, and share data and code on osf.io. This project will also involve pre-registration of all study designs.

**Recommended Reading**

Leach, D. P., Kolokotroni, Z., & Wilson, A. D. (2019, April 1). Perceptual Information Supports Transfer of Learning in Coordinated Rhythmic Movement. https://doi.org/10.31234/osf.io/c8qvp

Cognition and Behaviour

5. Aesthetic Experience across Classical & Contemporary Metrics: Professor Anna Abraham and Dr Lydia Windisch (Director of Studies)

Project Summary: An essential feature common to all art forms is that a work of art is designed to elicit a specific physiological or behavioral response or set of responses. But what is unique about the elicited aesthetic response upon appreciating a work of art is that it is not a unidimensional reaction that one experiences. Instead, we undergo states of complex sensuous phenomenology that are subjective and cannot be fully explained by the sensory features of the object alone. There are several ideas concerning the fundamentals of the aesthetic response, in terms of aesthetic experience, which is held to reflect an exceptional state of mind, as well as aesthetic preference, which is a judgment of beauty. Within aesthetic experience, three components can be distinguished: (a) aesthetic fascination as evidenced by high levels of arousal, absorption in attentional focus and a sense of loss of time, (b) aesthetic appraisal or cognitive engagement which allows one to transcend generic uses of meaning, and (c) aesthetic emotions which give rise to feelings of unity and connectedness with the object of aesthetic fascination and appraisal. This PhD project will examine the behavioural and physiological correlates of the aesthetic experience across visual and auditory mediums of artistic expression.

Recommended Reading


Health and Clinical Psychology

1. Understanding the experiences of trying to conceive for women with no known fertility problems: Dr Kirsty Budds (Director of Studies) and Professor Georgina Jones

Project Summary: Research suggests that the process of trying to conceive is experienced as emotional and stressful for women (Jones et al., 2015) and it has been likened to an emotional rollercoaster where women navigate a monthly cycle of uncertainty and waiting until they receive a positive pregnancy test result (Sweeny et al., 2015). It is estimated that the average length of time it takes to conceive is six months, with 1 in 7 couples at risk of experiencing difficulties trying to conceive. However, couples in the UK are not advised to seek support from a GP until they have been trying unsuccessfully to conceive for 12 months (6 months if women are over 35). This means that women may be actively trying for a lengthy period of time without advice and support from health professionals. Existing research tends to focus on women or couples with a diagnosed fertility problem or seeking treatment for infertility. Less understood are the experiences of women with no diagnosed fertility problems or who may be in the early stages of trying to conceive.

Meanwhile, the contemporary context in which women are trying to conceive is one where increasing emphasis is placed upon women's ownership and responsibility for reproductive health and pregnancy outcomes. Women have a variety of options for monitoring their fertility, including fertility tracking apps and ovulation predictor kits. These methods are widely available on the high street, and position women as having autonomy and control over their fertility. However, there is no psychological support available to women who may obtain unexpected or confusing results. Additionally, the period before conception is increasingly recognised as of critical importance for both short and long-term health outcomes of mothers and their babies. This has led to recent recommendations that women trying to conceive engage in a number of health protective practices, such as folic acid supplementation, smoking cessation, and avoidance, or at least marked reduction of, alcohol intake (NICE, 2008). Pregnant women report anxiety resulting from the pressure placed upon them by both themselves and others to follow these kinds of prescriptions (Neiterman & Fox, 2017), but we know little about the impact of these recommendations on women’s experiences of trying to conceive. Given these recommendations are linked to pregnancy outcomes, it is possible they might induce more anxiety at a time that has already been defined as emotional and stressful and so it is important to examine women’s experiences of trying to conceive within this context.

Aims: The main aims of this PhD are to explore:

What is the experience of trying to conceive among women with no known fertility problems?

Given that it can take a period of months or even years to become pregnant, how might the experience of trying to conceive change over time?

How do women navigate health advice and recommendations during the preconception period?

How do recommendations around preconception health impact upon women’s experiences of trying to conceive?

This project might be of particular interest to candidates who are interested in women’s reproductive health from a feminist perspective. The study will use qualitative methods to examine women’s experiences of trying to conceive through in-depth interviews. In order to capture women’s experiences of trying to conceive over time, interviews will take place at two time points. There may also be scope to use some more participatory methodologies, such as photo elicitation techniques.
The findings of this research could inform recommendations for how advice and support is best given to women with no known fertility problems during the period of trying to conceive.

**Recommended Reading**


Health and Clinical Psychology

2. Exploring factors involved in the development of suicide ideation in patients experiencing cancer: Dr Trish Holch, Dr Katie Dhingra and Dr Kate Absolom (University of Leeds)

Project Summary: Despite significant improvements in cancer treatments, a diagnosis of cancer can cause substantial psychological distress (Pitman, Suleman, Hyde, & Hodgkiss, 2018). Individuals may fear death; physical pain; adverse effects of treatment, such as disfigurement or loss of physical functioning; or alterations in their social roles (Pitman et al., 2018). This distress may have a role in the development of suicide ideation (i.e., thoughts of death by suicide) (Filiberti et al., 2001). Moreover, cancer (and its treatment) may play a role in increasing an individual’s capacity for suicide. According to recent theories of suicide, in order for a person to engage in suicidal behaviour, they must not only have the desire for death but also have the capability to carry out a suicidal act. This capability requires the individual to overcome the natural fear of pain and death that most humans possess.

Evidence from systematic reviews has shown that individuals living with cancer have a 20% increased risk of suicide compared to age- and gender-matched cohorts, particularly in harder to treat cancers and those with the worst prognosis (mesothelioma, stomach, pancreatic and lung) (Robson, Scrutton, Wilkinson, & MacLeod, 2010). Although the absolute risk of death by suicide may be low compared with the risks for other causes of death in people living with cancer, these deaths are potentially preventable.

The James Lind Alliance in a Priority Setting Partnership (PSP) with the National Cancer Research Institute (NCRI) has set a list of ten research priorities to enable adults with cancer to live better with and beyond cancer (LWBC) and at number 5 is “assessing the short and long term psychological impacts of cancer” This PhD will provide the opportunity to: a) explore the factors involved in the development of suicide ideation and the translation of suicidal thoughts into action (i.e., a suicide attempt) (Klonsky, Saffer, & Bryan, 2018), b) the effect on carers, and c) explore health professional attitudes and expertise in recognising suicidal ideation in oncology practice.

Methodology

It is envisaged a mixed methodology approach will be utilised determined by the candidate’s particular strengths and focus, commencing with an exploration of the literature. Possible avenues of exploration are: development of surveys to capture patient carer views and health professional views on early detection and management. Follow up with semi-structured interviews or email interviews, quantitative analysis with patients using validated questionnaires based on theories of suicide positioned within the ideation-to-action framework (Klonsky et al., 2018).

By understanding the spectrum of suicidal ideation and behaviour of cancer patients, in combination with greater training in regard to suicide prevention, we envision that healthcare professionals will be able to more easily and more accurately identify suicide risk and intervene.

Recommended Reading


Health and Clinical Psychology

3. Understanding the impact upon decision-making, quality of life, and family dynamics in young people with a primary immune deficiency as they transition from paediatric to adult services: Prof George Jones (Director of Studies) and Dr Trish Holch

Project Summary: Primary immunodeficiency disorders (PIDs) consist of a group of rare, inherited genetic disorders characterised by an impairment in the immune system [1-2]. This means that for people affected by PIDs parts of their immune system is missing or not working properly and so many people will experience frequent infections, recurrent colds and other respiratory illness. Other people living with a PID can experience a range of more severe illnesses including pneumonia, skin disorders, arthritis and heart problems to name a few [3]. As such, the symptom and treatment burden associated with PIDs often have a significant negative impact upon a patient’s quality of life [4-5]. Children and adults can experience frequent absenteeism from school or work, reduced participation in social and sporting activities as well as a range of psychological symptoms in response to living, treating and coping with their condition [2].

Aims:

- To measure decision-making preparedness and needs in young people with a PID as they transition to care within adult services and their parents/carers.
- To determine disease and treatment specific aspects of decision-making in PID
- To measure the impact of transitioning between services on other patient-reported outcomes including psychological morbidity, family dynamics and healthcare utilisation
- To understand, in depth the experiences and decision support needs of young people living with a PID transitioning to adult services and their parents/carers.

This PhD project involves a combination of longitudinal and cross-sectional mixed-methods design and entails:

- Undertaking systematic reviews of decision needs and open access resources to support transition to care generally and for young people with a PID.
- Administering a survey to young people and their parents/carers using questionnaires designed to measure aspects of decision-making, treatment burden, psychological well-being, family dynamics and quality of life. Assessing how these factors impact upon the transitioning process,
- Administering a survey to PID adult and paediatric healthcare professionals and NHS transition teams to understand how they support transition to adult services for this group of young people and their parents/carers
- Undertaking qualitative semi-structured interviews with a sub-sample of young people, their parents/carers and HCPs to gather more in-depth data.
This STEM PhD studentship might be of particular interest to candidates who are interested in chronic illness, applied health psychology and have strong quantitative skills as well as mixed methods skills. This PhD research should hopefully advance our understanding of the support needs of young people with a PID and their parents/carers. The resulting outcome might the co-production of a new resource to better support young people and their families at the time of transitioning services and developing a model of care that is applicable to other groups of patients and their families facing service transition across the NHS.

Recommended Reading


Health and Clinical Psychology

4. Domestic violence and abuse during pregnancy: Assessing victim-survivors’ experiences and their healthcare needs: Dr Tamara Turner-Moore (Director of Studies) and Professor Georgina Jones

Project Summary: Pregnancy and the postpartum period have been identified as a risk factor for domestic abuse. Although pregnancy can offer protection for some women (1), one in three women who suffer domestic abuse for the first time are pregnant (2) and 20% of women in refuge services are pregnant or have recently given birth (3). Women who are the victims of abuse are known to suffer a number of poor maternal outcomes, including preterm labour, antepartum haemorrhage, stillbirth, low birthweight babies, and a number of other undetected obstetric complications as a consequence of not being able to attend/seek care. The psychological consequences of the abuse can also be substantial. Of the women who died from suicide between 2003 and 2005, 42% were living with domestic abuse. However, it is not known if these women had a history of mental ill health before becoming pregnant (4).

Aims: To focus on women who have experienced domestic violence or abuse during pregnancy, and explore the following questions:

- What are women’s experiences of domestic violence and abuse during pregnancy and what individual, social and cultural factors influence and shape these experiences?

- What are women victim-survivors’ experiences of healthcare services during pregnancy and labour, and how could these services be improved? For example, to what extent do healthcare services listen to and respond to women victim-survivors’ needs, engage them in decision-making processes, and respect their decisions and choices during pregnancy and labour?

- What are the current experiences/practices/policies of the multidisciplinary obstetric and gynaecological health care team in caring for this patient group?

- What are the facilitators and barriers to women victim-survivors accessing ante-natal care during pregnancy?

This STEM PhD project will involve mixed-method research methods. However, due to the sensitive nature of this topic, innovative and ethical ways of exploring these issues will also be required. This project might be of particular interest to candidates who are interested in applied health psychology, women’s maternal health, gender-based violence, researching hard to reach/vulnerable groups and have strong mixed-method skills. This PhD research should hopefully advance our understanding of the support needs of one of the most vulnerable groups of pregnant women. The resulting outcome might be the co-production of a screening tool that would assist healthcare professionals in the NHS to identify and support women who experience domestic violence or abuse during pregnancy.

Recommended Reading


Health and Clinical Psychology

5. Donor and Recipient Experiences of Known Sperm Donation: Dr Nina Martin (Director of Studies), Professor Georgina Jones, Dr Tamara Turner-Moore

Project Summary: With increasing numbers of children born each year via sperm donation, a growing body of research exists on the experiences of those who donate sperm, those who receive sperm, and their children (e.g. Golombok et al., 2017; Nordqvist & Smart, 2014; Zadeh et al., 2018). This research has focused on anonymous donation or, more recently, donation with an identifiable donor. Little research, however, has examined ‘known sperm donation’ whereby sperm is donated by family members, friends, or those who are already known to the recipient(s). It has been acknowledged (Nikolettos, Asimakopoulos & Hatzissabas, 2003) that known sperm donation, due to the ongoing relationship between the donor and the recipient(s), may present a range of benefits and challenges to the intended parent(s), the donor, the donor-conceived child, and the current and future family. Of the research that has been conducted on known sperm donation to date, much of this is within the context of lesbian-parent families (e.g. Riggs, 2008a, 2008b; Goldberg & Allen, 2013), whereas very little is known about mixed-gender couples’ experiences of using a known sperm donor (but see Nordqvist, nd).

Research Aims: To explore the experience of known sperm donation from the perspectives of sperm donors, and mixed-gender recipient couples, in particular, the following potential questions; What factors impact upon how those embarking on known sperm donation (as a donor, or recipient/s), understand and make sense of their experience before, during and after the donation? How do those embarking on known sperm donation, perceive and make sense of their relationships with each other (donor and recipient/s, and with any child/ren) born following the donation? What are the benefits and challenges that known sperm donation presents to those involved in the donation (as either the donor, or recipient/s)?

This PhD project is likely to involve:
A scoping review to map the key concepts underpinning this under-researched area (known sperm donation and donor’s and recipient’s experiences of it) and the main sources and types of evidence available, including policies, legislation, academic scholarship and debates.

A qualitative longitudinal study of recipients and donors, starting with their initial decision to use a known donor and following their journeys over a 12-month period. This could involve interviews, though other qualitative methods are welcomed.

Possibly, as well as/instead of the longitudinal study, retrospective in-depth interviews with recipients and donors about their previous experiences of known sperm donation.

This GTA PhD studentship might be of particular interest to candidates who are interested in assisted conception, applied health psychology and have strong qualitative research skills. This PhD research should hopefully advance our understanding of recipients and donors experiences of known sperm donation, with a view to informing practice guidelines for infertility counsellors, and to provide support and information to those undergoing known sperm donation throughout the donation process.

Recommended Reading


Health and Clinical Psychology

6. Male infertility: a canary in the coal mine: Dr Laura Ashley (Director of Studies), Professor Georgina Jones, Professor Brendan Gough, Professor Allan Pacey

Project Summary: Men with fertility problems are at increased risk of future health problems including cancer. This GTA/STEM PhD will examine awareness of this risk among men with fertility problems and fertility health care professionals, and both groups’ views, needs and preferences regarding the potential development and provision of psychosocial, clinical surveillance and health promotion information, support and services. Around 1 in 7 couples have difficulty conceiving, and for approximately half of these couples this is due wholly or partly to male factor problems (e.g. low sperm count, poor sperm motility) [1,2]. In recent years, a growing number of studies have shown that male infertility is a risk factor for future health problems, even after controlling for confounding variables such as socio-demographic and lifestyle factors. Several studies have found that men with infertility diagnoses are at significantly increased risk of later testicular and prostate cancers [3-8]. A 2016 population-based USA study found that men with oligozoospermia had a greater than ten-fold increase in the risk of testicular cancer relative to fertile men [5], and a 2019 population-based Swedish cohort study found that men who achieved fatherhood through ICSI (a form of IVF) had a 60% higher risk of prostate cancer compared with men who conceived naturally [7]. Research shows that male infertility is also associated with increased risk of other types of cancer, other health problems such as diabetes and heart disease, and a higher mortality rate [8-14]. Thus, although the aetiological mechanisms underlying infertility and subsequent morbidity are yet to be understood, mounting research highlights men with fertility problems as an at-risk group.

Consequently, some academics and clinicians are beginning to consider the need for increased counselling, clinical surveillance and/or health promotion for men with fertility problems [7,10,15-18]. For example, following their recent cohort study, Al-Jebari et al. concluded that men with fertility problems “constitute a risk group in which testing and careful long-term follow-up for prostate cancer may be beneficial” [7]; and Professor Allan Pacey commented in BBC news coverage of the cohort study that “perhaps all men who are diagnosed with a fertility problem in their 20s and 30s should be given a leaflet explaining what this might mean for them in their 50s and 60s, so that they can be aware of possible future problems, and be encouraged to visit their GP a bit quicker than they often do” [15].

Very little is currently known about the extent to which men with fertility problems, and fertility and other health care professionals, are aware of the growing evidence of male infertility as a harbinger of future health [17,18], and about both groups’ views, needs and preferences in relation to the potential development and provision of psychosocial, clinical surveillance and health promotion information, support and services. It is important to note that the psychosocial toll of infertility, assisted reproductive treatments and unwanted childlessness is well-documented [19-23], and thus the increased risk of future illnesses for men with fertility problems is something of a ‘double-blow’ for them and their partners – “it’s in the back of my mind, and then when I hear stuff in the news about being more likely to get cancer, and other things, it does worry me…especially now we have children, and after everything we’ve been through to have them” [35 year-old man who achieved fatherhood via ICSI]. Research into the experiences and perspectives of this at-risk group and their clinical teams is vital to ensure that any information, support and services developed and offered are acceptable and useful to men with fertility problems, and clinically appropriate and feasible. This PhD will comprise: (1) a review of relevant literature (scoping or systematic review, depending on its exact focus, and the extent and nature of the relevant research [e.g. 21,24]); (2) semi-structured qualitative interviews with men diagnosed with fertility problems and fertility health care professionals; and (3) a quantitative survey(s) of a larger number of men and/or fertility professionals. The precise research questions and methods will be determined following the findings of the
literature review, and through discussions with patient and public involvement (PPI) representatives and the supervision team.

References

15. https://www.bbc.co.uk/news/health-49808911


Health and Clinical Psychology

7. Investigating mindfulness and relaxation techniques for stroke survivors and their carers: Dr Suzie Xu Wang (Director of Studies), Professor Georgina Jones and Dr Laura Ashley

Project Summary: Anxiety is common following stroke and seems to persist and worsen over time [1]. Studies on psychological techniques to reduce stroke-related anxiety and/or distress are limited. Similarly scarce is research on interventions for carers of stroke survivors [2], as evidence show they have elevated level of psychiatric morbidity and mental strain [3]. Among the few studied interventions for survivors, mindfulness and relaxation techniques have been shown as useful self-administered methods to alleviate anxiety and tension after stroke [4, 5]. However, existing techniques are often poorly optimised for stroke survivors, especially those with communication difficulties. In a recent study, mindfulness and relaxation techniques were tailored for stroke survivors, including those with speech difficulties [6]. These techniques were made into a film DVD and a YouTube video and seemed feasible and acceptable by the survivors.

This project aims to build upon the aforementioned study and answer the following questions regarding the impact of these tailored techniques: 1) do they benefit stroke survivors and carers? 2) do they have different impact on more acute patients versus community survivors? 3) do they work differently for survivors and their carers?

It is anticipated that this PhD project will involve a combination of an independent time series and mixed-methods design with three phases.

1: Undertaking a patient and public involvement (PPI) with hospitalised stroke patients and health practitioners to determine which professional should introduce these techniques for patients.
2: Administering a survey with hospital inpatients to measure their level of anxiety, perceived stress, and perceived health.
3.1 Providing interventions to a different group of inpatients, community survivors, and their carers
3.2 Following up participants in 3.1 after 6-8 weeks and administering a survey to measure their level of anxiety, perceived stress, and perceived health.
3.3 Undertaking qualitative semi-structured interviews or focus groups with a sub-sample of participants in 3.1 to gather more in-depth data.

However, there is the opportunity to use alternative methods depending upon the particular strengths and interests of the student.

Recommended Reading


Speech and Language

1. Communication post total laryngectomy: what factors influence listener judgements in relation to the method of communication achieved? Dr Sarah James (Director of Studies) and Dr Anne Hurren

Project Summary: People undergoing total laryngectomy for cancer of the larynx are generally counselled that surgical voice restoration (SVR) is the “gold standard” communication method after total laryngectomy. However recent advances in chemoradiation have led to laryngectomy being reserved as a salvage procedure when larynx preservation treatments fail and studies have linked this change in practice to poorer voice outcomes and more medical complications when SVR is undertaken. There is a need to investigate whether the alternative methods of communication via an electronic larynx (which has no known complications) can offer an acceptable alternative to SVR. Clinicians responsible for providing pre-surgical counselling to service users have limited evidence about how patients themselves or members of the public perceive these different methods of communication. Research to date has largely focussed on Speech and Language Therapists’ judgements of intelligibility and acceptability of SVR rehabilitation but little is known about the lived experience of those who communicate with an electrolarynx and the perceptions of members of the public with whom laryngectomy speakers will communicate in a range of communication situations. This PhD will offer the opportunity to investigate how speakers rehabilitated with SVR and/or an electronic larynx and with a wide inter speaker range of proficiency in each method: a) rate their own speech in relation to their peers and their own participation in communication situations, b) are perceived by different demographic groups from the community (naive judges) and c) experienced Speech and Language Therapists. Validated methods of assessment will be used in these investigations: the Communication Participation Item Bank, the Sunderland Tracheoesophageal Perceptual Scale and the Newcastle Audio Ranking Test. Statistical analysis will be undertaken to compare inter rater judgements using intra class correlations.

Recommended Reading


2. Investigating writing interventions and predictors of recovery in traumatic brain injury: Dr Sarah James (Director of Studies) and Dr Lindsey Thiel

Project Summary: Many people with traumatic brain injury (TBI) have difficulties with spoken and written language related to underlying cognitive, linguistic, visual and motor impairments (Dinnes & Hux, 2017; Wheeler et al., 2014). Writing impairments in people with TBI can be characterised by difficulties in composing messages, organising discourse, generating content, written word retrieval, spelling, and grammar (Dinnes et al., 2018). Internet use has become an essential part of daily life (Kelly et al., 2015; Thiel et al. 2017) and social media can provide people with TBI opportunities for communication and strengthening social relationships (Brunner et al., 2019). Therefore, acquired writing impairments can have significant consequences for a person’s ability to communicate and participate in society (Dinnes & Hux, 2017; Kelly et al., 2015; Menger et al., 2015; Thiel et al., 2017). Research into the rehabilitation of acquired writing disorders has largely focused on aphasia, with theoretically-driven therapies and compensatory technologies showing positive outcomes for this population (Marshall et al., 2018; Thiel et al., 2015). Within research into language and communication disorders associated with TBI, there has been a lack of research into writing difficulties and how to treat these. In their recent qualitative study, Dinnes et al. (2018) concluded that because of the effect that writing difficulties can have on quality of life and ability to pursue goals in people with TBI, further research needs to focus on developing assessments and exploring the effects of writing treatments.

This PhD project will include the following studies:

• A survey of interventions that are currently provided for dysgraphia in people with TBI by speech and language therapists
• A series of multiple case studies aiming to determine the efficacy of therapies and technologies in improving functional writing. Factors determining therapy outcomes, including cognitive and linguistic skills will be explored.

References


**Recommended Reading**


Psychology Applied to Safety and Health (PASH)

1. Accident Prevention at Work! The Role of Usability Perceptions of Safety Systems, Technologies and Procedures in Supporting Safety Compliance in The Workplace: Dr Matteo Curcuruto and Dr Jim Morgan

Project summary: Compliance with safety systems, rules and procedures is an important dimension of an individual’s safety performance in the workplace. A great deal of evidence confirms that compliance is associated with fewer accidents and injuries (e.g. Griffin & Curcuruto, 2016). Violation of existing rules and procedures is considered one of the most important factors that contribute to accidents (Hu et al., 2016). Therefore, it is important to improve our understanding of the factors that might influence individual compliance with safety systems, rules and procedures.

Research aims

This research stream at PASH research unit intends to investigate the role of employees’ perceptions of the usability of the safety systems, technologies, tools and procedures aimed to support safety in the workplace. Recent studies have especially underlined the importance of employee cognitive evaluations associated with usage of safety tools and technologies, like the perceptions of usefulness and ease of use, the task-technology fit evaluation, the perception of compatibility between personal behavioural style and technological tools (Hu et al., 2016; 2018; Kanse et al., 2016; Mariani et al., 2013).

Research Questions & Methods

Using a mixed methodological approach with interviews, focus groups, data archive analysis, and survey questionnaires, we intend to investigate how the perceptions of usability leads individuals toward a higher level of safety compliance with the safety standards of companies and organizations. Moreover, we intend to investigate which facilitating conditions can be put in place by the organizations to support a better integration between safe work conducts, work procedures, and the characteristics of the safety systems, tools and equipment, considering both the existing technologies and/or recent innovations introduced in the companies (Curcuruto et al., 2018; Roger, 1995; Venkatesh, V., & Bala, 2008).

Contacts and links

The successful candidate will develop this research project with the support of the staff of PASH research unit at Leeds Beckett University. The successful candidate will be given the opportunity to develop this research project using their existing contacts with relevant industries, or by identifying new industrial links with the support of PASH research unit.

Recommended reading


Gender and Sexualities

1. Sexism and racism in Psychology curricula: Analysing institutional ‘talk’ & curricula: Dr Glen Jankowski (Director of Studies), Dr Neda Mahmoodi and Dr Ellie Willard

Project Summary: Since at least the 1970s, there have been concerns about educational curricula’s various biases (Bordo, 1999; Jay, 2003). The ‘Why Is My Curriculum White’ movement highlights the omission of knowledge from people of colour and those outside of the Global North (e.g., UCL Collective, 2015). Feminists have also highlighted the androcentrism of curricula (e.g., Bordo, 1999). Empirical work shows these biases are entrenched in psychology as they are in other disciplines. Specifically, psychology content analyses have found a dominance in research samples, editorial boards and authorship of White, Westerners (e.g., Arnett, 2008; Cundiff, 2012) of men (e.g., Cundiff, 2012) and of White, Western men in module reading lists.

These biases have consequences. For example, within the university, the persistent attainment gap between white and BAME students has been linked to a White, Western curriculum (e.g., Jay, 2003). Nonetheless, if education can magnify racism and sexism, than it can also challenge it. A diverser, anti-sexist and anti-racist curriculum in education may allow for this.

The above analyses have tended to ignore the intersection of androcentrism and racism (Crenshaw, 1989) leaving women of colour out. Furthermore, curricula change has been slow especially at the broader institutional level (inc. through governing body accreditation guidance). Therefore, there is a need to understand the institutional processes that facilitate or block curricula diversification from an intersectional perspective.

This PhD has two aims:

To explore educational curricula

e.g., by using CA (conversational analysis) to explore institutional ‘talk’ on curricula

e.g., by quantitatively content analysing curricula materials

To use an intersectional analysis (Crenshaw, 1989) that looks at androcentrism, racism and its overlap

Recommended Reading


Gender and Sexualities

2. Gas lighting hair loss pain: An applied, mixed methods project: Dr Neda Mahmoodi (Director of Studies) and Dr Glen Jankowski

Project Summary: “Oh no … when you mix this study with the studies done on short men (proving women prefer taller men over short men), well, it means I’m doomed! Ugh”. ~(hair loss forum user)

Hair loss is experienced by 30% of men by the age of 30 and most by the age of 70 (NHS Choices, 2013). Some women also experience hair loss. It is a benign condition that has no health implications (Harvey, 2013). Despite this, people with hair loss tend to be infrequently represented in the media (Jankowski et al., 2014) or depicted as sad, depressed and isolated from others when they are (Harvey, 2013). Forum data shows hair loss is regarded as a loss of youth, beauty and masculinity/femininity (Jankowski, Sherwin, Deighton-Smith & Bell, forthcoming; Ricciardelli, 2011) It is also associated with significant stigma and discrimination. Yet paradoxically is seen as something that men in particular should ‘get over’ and is ‘fair game’ to mock (e.g., consider the comedic trope of a balding man wearing an ineffective toupee). Thus some forum users describe being ‘gas lit’ where their very real experiences of stigma and pain are denied. To sum, although hair loss itself should be benign, the associated meanings with it can be profoundly painful for those experiencing it.

Hair loss support is limited. Hair loss ‘treatments’ may be ineffective, expensive or carry other risks. Support websites, forums and blogs (e.g., hairlosstalk.com, hairlosshelp.com) exist but can medicalize hair loss, be otherwise toxic or funded by pharmaceutical companies (e.g., misogynistic; (Jankowski, Sherwin, Deighton-Smith & Bell, forthcoming). Interventions designed to promote positive body image (of which hair loss can be a focus) tend to be small scale, overly individualized, or have limited long term increases on positive body image especially on men (Irving, 1999; Stice & Shaw, 2004; Yager, Diedrichs, Ricciardelli, & Halliwell, 2013). Interventions can however be useful not as a ‘cure’ for hair loss body image issues, but rather as a source of affirmation and recognition of the very real pain that people with hair loss experience. Indeed, the small charity Alopecia, UK appears to be doing this work.

This PhD would take a mixed methodological approach in order to achieve two interrelated aims 1) to affirm the experiences of people with hair loss by highlighting the hair loss stigma and discrimination and 2) to develop and evaluate an intervention or intervention components that can be used to support people with hair loss

Recommended Reading


33
Gender and Sexualities

3. Exploring critical, liberatory and/or community-based approaches to RSE on sexual bullying: Dr Kate Milnes, Dr Tom Muskett and Dr Tamara Turner-Moore

Project Summary: Sexual bullying encompasses sexual harassment and homo-, bi- and transphobic bullying, and it is widespread amongst young people (Milnes et al., 2015). Tackling sexual harassment (Women and Equalities Committee, 2016) and homo-, bi- and transphobic bullying (Government Equalities Office, 2018) have been identified as policy priorities which schools can address within Relationships and Sex Education (RSE), and from September 2020, RSE will be compulsory in schools in England and Wales. In a recent project exploring young people’s experiences of and views about RSE, we found that how young people felt RSE should be delivered (e.g. dialogically rather than didactically, flexibly and democratically, informally and in small groups) diverged significantly from current practice in most schools, suggesting a need to “rethink” RSE. Some of these suggestions from young people about RSE delivery overlap with ideas from critical educational theories such as Critical Pedagogy (see Freire, 1968, 1996). Critical Pedagogy rejects traditional hierarchical models of teaching to emphasise the importance of dialogic learning, the raising of critical consciousness, and the orientation of educational institutions to the cultures of learners; this approach has already had some application within formal education around sexualities (Sanjakder and Kam-Tuck Yip, 2018). It also has influenced thinking in emancipatory and action-focused approaches to psychological work, such as Liberation Psychology (Moane, 2010) and Critical Community Psychology (Kagan et al., 2011), which in turn have close links to participatory research methods such as Participatory Action Research (Kagan, 2012).

We are proposing a PhD project that explores the potential of critical, liberatory and/or community-based approaches for “rethinking” RSE in relation to sexual bullying. This could involve working with young people (e.g. as co-informants and/or co-researchers) to design a critical, liberatory and/or community-based approach to RSE on sexual bullying, and the researcher and young people recording and critically reflecting on this experience. The researcher and young people could also explore (e.g. with other young people and school staff) the theoretical and practical challenges and tensions of implementing their proposed approach within a modern UK school context. A large and eclectic range of methods (e.g. [auto]ethnography, creative methods, focus-groups, qualitative or quantitative surveys) could potentially be applied to such a project. However, we would anticipate that participatory approaches will be central to any proposal at this stage.

If you are interested in applying and would like an informal chat or further information about the project, or to talk through your proposal, please contact t.a.muskett@leedsbeckett.ac.uk. Given that the project will involve working with young people in schools, an enhanced DBS check will be required for any successful applicant.

Recommended Reading


**Gender and Sexualities**

4. *Gender, Class and taking up space and playing with in/visibilities: Dr Bridgette Rickett and Professor Jane Raisborough*

**Project Summary:** Feminist gerontology reports that women feel invisible as they age. They are invisibilised by an anti-ageing culture that denies women their personhood with grave consequence for self-esteem, mental health and well-being. The importance of these insights is lost if we don't consider that just as ageing women are invisibilised, young women are negotiating a context of hyper-visibility through a combination of post-feminist femininities and a pervasive selfie culture and these experiences are heavily classed, raced and shaped by (dis)abilities.

We are looking for projects that explore classed stories/depictions of women or by women across the lifespan that tell us about how they negotiate the tensions and transitions of visibility/invisibility. What do these stories/depictions tell us about what different women learn from each other? We are especially interested in classed and gendered understandings of what the stories/depictions tell us about the negotiations women make to enable or deny them access or participation in digital and ‘real-life’ public spaces. Also, we are interested in the way that risks that they both face and embrace are presented and how the consequences for well-being are talked about in regards to social class and gender.

If you are interested in applying, and would like an informal chat or further information about the project, or to talk through your proposal, please contact the Director of Studies.

**Recommended Reading**


Gender and Sexualities

5. Gendering and Classing the Imagining of Belonging in UK Higher Education: Dr Bridgette Rickett and Dr Jessica Drakett

Project Summary: Previous research has explored how women experience UK Higher Education differently depending on their class background (e.g. Reay, 1998; Langhout, Drake & Rosselli, 2009). What is made evident here is that social segregation and difficulties with feeling a sense of belonging continue to blight working-class women’s experiences of themselves and their academic work lives (e.g. Acker, 1992; Reay, 1998; Langhout, Drake & Rosselli, 2009).

However, we know very little what a university would need to look like for working-class women to feel they belong therefore this PhD would employ creative methods to enable working class women to re-imagine a university that welcomed them. These methods would aim to enable thoughtful communication of gendered and classed understandings around belonging in the re-imagined university.

Recommended Reading

