

[Phase 1](#) proved to be a great success which laid the foundations for us to take the project further. We wanted to delve deeper and develop our own research project from the ground up. Although some of the community members involved in phase 1 had other commitments, we still had a strong core who were able to continue into a second phase. These were:

Abigail Lee, Andrew Speight, Ben Hall, Caitlan Greenwood, Chloe Dwornik, Conal Land, Elsi-May Carroll, Grace Robson, Helen Gwilliam, Henry Pollock, Lauren Wyatt, Lindsay Jones, Rochelle Morris, Ryan Owens and Sam Richardson.

Phase 2 of the project also had continued buy-in from the organisations involved in phase 1: Blackpool Council, Citizens Advice Blackpool, Boingboing, Healthwatch Blackpool, and NIHR. The representatives from NIHR directly involved were: Anmarie Allt, Greg Woodley, Irum Durrani, Jonathan Aitchinson and Sayeda Khatun.



*The team at a meeting at the outset of the project*

?We have spent well over 50 hours on phase 2 since June 2022, meeting fortnightly to develop the project.

At the beginning of phase 2 there was a big question mark over how we could fund the project. We discussed this issue with NIHR and were informed that there was an amount of funding still available to continue the project. We were asked to put together a costed proposal that could then be assessed by NIHR to determine its feasibility. To do this, we needed to establish several things, including:



*The team at the final day of sharing learning with celebratory certificates and hoodies*

- How often we should meet
- How long our sessions should be
- How long we wanted to commit to phase 2
- What sort of research we wanted to conduct
- Where the sessions would be held/ costs for room bookings
- Whether we would budget for food/refreshments
- How much work we would be doing outside the co-research sessions

- What equipment people had/ what would be needed to be bought
- Other costs, like data processing software

In addition, although the facilitator organisations had independent funding to take part in phase 1 of the project, this was no longer available and so these costs needed to be incorporated into the budget for phase 2.

We submitted the proposal to NIHR but received the response that the remaining funds wouldn't cover what we had set out. NIHR were however keen for the project to continue because of the progress we had made in phase 1, so we worked closely together to negotiate a compromise. We ended up agreeing that we would meet for 3 hours rather than a full day every fortnight, with the understanding that we would need to apply for further funding down the line to continue the project. This is where we landed on our current plan: to do the foundational work on defining a research question, and then recruit an academic researcher with whom the project could be co-designed and further funding applied for.

Phase 2 began with a 5-hour session where the group was introduced to the research process. This was led by members of the group who had research experience. We physically mapped out each individual stage of the research process through an activity where we matched each individual stage to their descriptions. This allowed those in the group who were unfamiliar with research to begin to understand the crucial aspects they would need to consider as we progressed into phase two.

Following on from this session, the group then had to decide what the project's area of focus was to be. This was not a completely free choice for the community members. The NIHR presented the group with a list of four priorities: cancer, cardiovascular, respiratory, and mental health. The group worked collaboratively to choose a topic from the given four. Leaning on the lived experience within the group, and knowledge of the local area, mental health was chosen as our focus. We know this is an area of health inequality which matters greatly to the community.

Even though this was not a completely free choice, the group strongly believes that they would have chosen mental health as a priority anyway, due to the great importance placed on it by the community members involved in the project.

Lived experience is a strength of the group. From this decision to focus on mental health, we reflected again on our lived experience and identified variables which affected our mental health. Individuals shared how interactions with services, family, or online, changed their experiences. From this, the group reviewed the existing research, with guidance from members involved in Phase 1 who had had research training. This was done to ensure that the chosen topics were novel, relevant to the community in Blackpool, and had the potential scope for wider influence.

As a result of these discussions, 10 questions were chosen reflecting the lived experiences of the group. 10 was not chosen arbitrarily, it was the number the group came to naturally. During discussions the questions were also ranked by the group using a decisions matrix, with a score out of 10 given to each question, by each group member, in the following areas: personal favourite, novelty, time/practicality and impact/scalability.

However, after discussions with Greg from the NIHR, it was decided to cease the decision-matrix process and write descriptive blurbs for all 10 questions to allow for wider scope when choosing a researcher. This also allows some flexibility for a researcher coming in who may have more knowledge of a specific question and a desire to work co-productively with young professionals in Blackpool. Over the following meetings, the group concentrated on each question individually and wrote a descriptive blurb for each.

The blurbs were produced collaboratively, with a focus upon the lived experiences of the group and how these made the questions both relevant and important. The group also continued to review the research, this time more specifically as it related to each question to understand how the literature was developing in this area. This process allowed for a blurb which reflects the lived experience and passion of the group behind each question but with an understanding of the practicalities of conducting research?

We will be back next time to share the co-produced research questions...