

# RESEARCH AND EVALUATION

ANNUAL REPORT 2025-26



**THE  
Big  
LiFE  
GROUP**

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# iNTRODUCTION

Since 2021, The Big Life Group has continued to strengthen its identity as a research-informed and driven organisation, with research and evaluation remaining central to how services are designed, delivered, evidenced and improved.

The 2025-26 reporting period reflects another year of sustained focus, marked by continuing primary research activity, high-quality knowledge exchange, continued collaboration with external researchers and practitioners from across the UK and further afield, and a clear commitment to bridging the gap between research and practice; ensuring that research evidence remains closely connected with, and embedded in frontline service delivery.

In a context where health and social care systems continue to face rising demand, the role of research and evaluation is more important now than ever. A strong research culture is enabling Big Life to test ideas, further innovation, learn systematically, understand impact, and respond with confidence to emerging and increasing need.

This report brings together Big Life's research and evaluation activity from 1 April 2025 to 31 March 2026, highlighting how evidence has informed services, supported communities and shaped future priorities.



# HEADLINE ACHIEVEMENTS THIS YEAR

## STEPPING INTO RESEARCH INITIATIVE

Our Research Coordinator secured a place on the Stepping into Research programme, a research capacity building initiative led by the National Institute of Health Research supported Mental Health Social Care Incubator at the University of Manchester. This opportunity will undoubtedly strengthen Big Life's ability to design and deliver applied mental health and social research from within our services, rather than through solely focusing on collaboration activities with external research groups, as is typically the lens in which third sector organisation contribute to research initiatives.

## RESEARCH STRATEGY GROUP

The Research Strategy Group, chaired by the organisation's Director of Research and Mental Health, with cross-group representation, continued to play a pivotal role via providing ongoing strategic oversight of research and evaluation activity, while formally meeting on a quarterly basis; ensuring that work remained aligned with wider organisational priorities and service objectives. As in previous years, this oversight function helped to sustain a culture in which evidence-informed practice, reflective learning and practice-based innovation have remained interconnected. This is particularly important given the organisation's services and general diversity.

## TRAUMA-INFORMED ORGANISATIONAL AUDIT

This year, we developed and delivered a comprehensive audit tool to assess organisational progress towards becoming a fully trauma informed organisation, with specific domains on cultural reflexivity and humility as well as racial trauma. Building on an existing framework from Surrey and Borders NHS Foundation Trust and earlier established linkages with their team, we then adapted and bespoke the tool to make suitable for the breadth and complexity of Big Life's services.

The audit was launched on World Mental Health Day in October 2025 and completed by teams and services throughout the organisation in November, with top-level analysis already undertaken and teams provided with tailored snapshots of findings relevant to their part of the organisation. In addition to this, we generated a set of strategic actions to be delivered over the next three year audit cycle, so that progress can be reviewed and evidenced ahead of the next audit in 2028. Further steps include preparing a manuscript on the development and use of this tool, with a particular emphasis on its uniqueness in comprehensively and robustly covering cultural competence, cultural reflexivity and racial trauma alongside wider trauma informed practice.



## BUILDING THE EVIDENCE BASE FOR OUR HEALING FROM RACISM AND RACIAL TRAUMA (HEARRT) APPROACH

We developed and delivered an innovative programme of research to evaluate effectiveness, acceptability and documentation of the overall concept of a non clinical, community based resource for those affected by racism and racial trauma. Drawing on lived experience leadership and co production, this work explicitly challenges the assumption that responses to racial trauma must sit solely within clinical or diagnostic frameworks, and instead tests a model that centres safety, connection, cultural humility and collective healing in community spaces. By systematically gathering qualitative and quantitative data, we have been able to explore not only outcomes, but also how different groups experience and access this kind of support, including barriers, enablers and perceived impact on everyday functioning and wellbeing.

As part of this programme, we finalised a manuscript (now published) describing the conceptual foundations, development and early evaluation of HeaRRT, reporting early results on feasibility, engagement and participant reported benefits. It highlights the distinctiveness of HeaRRT in its explicit and sustained focus on racial trauma, its embedding in community rather than clinical settings, and its commitment to cultural reflexivity, accessibility and intersectionality as central, rather than peripheral, design principles.

Aligned to the above, interest in our work on racial trauma and indeed our approach to organisational auditing of trauma-informed progress continues to grow. In March 2026, we delivered a webinar for the national Trauma Informed Systems Community of Practice (CoP), a cross-sector CoP established to support people interested in the development of trauma informed systems in public services. The webinar and accompanying resources are now housed within the NHS Futures Forum Collaboration platform. This webinar presentation also subsequently led to a request by Kent Council for the delivery of a similarly positioned session on trauma-informed auditing, demonstrating the growing national recognition for our expertise in this area.

## RESEARCH, LEARNING AND DEVELOPMENT (RLD) WEBINARS

A major feature of the year was the continued delivery of the monthly, CPD-certified, RLD webinar series. Building on the strong foundation established in previous years, the 2025-2026 programme brought together speakers from a wide range of universities and institutions from the UK and further afield undertaking work in health, educational and social care settings to share current research, stimulate discussion and support the translation of evidence into practice.

The RLD webinars continued to be well attended, serving not only as a research collaboration dissemination platform but as a learning function too, with more than 280 staff participating in the events over the course of the year. Furthermore, they have led to the development of several mutually beneficial ongoing collaborations and working relationships with the external research community.

The RLD programme this year, shown below, covered an especially broad set of themes, ranging from suicidality, dementia prevention through to menstrual health and its importance in psychiatry, light exposure and wellbeing, racialised communities and healthcare including Muslim mental health, and Artificial Intelligence in healthcare. This breadth reflects Big Life's commitment to engaging with topics that are timely, relevant, and capable of informing more inclusive and effective support.



# 2025-2026 WORLD SCHEDULE

Month	Speaker(s)	Affiliation	Topic
April 2025	Professor Patricia Gooding	University of Manchester	Cognitive Approaches to Combating Suicidality (CARMS) study findings
May 2025	Professor Abbas Edalat	Imperial College London	Self-initiated humour and the Self-Attachment Technique (SAT)
June 2025	Nicole Warriner	Greater Manchester Mental Health NHS Foundation Trust	The Soteria crisis house approach
July 2025	Natalia Parry-Vaughan	City University, London	Experiences of people aged over 65 in accessing psychological therapies
Aug 2025	Prof Lucy Webb	Manchester Metropolitan University	Greater Manchester Alcohol Behaviour Change Project
Sept 2025	Prof Ben Johnson	Fairleigh Dickinson University, New Jersey, USA	Smartphone study of young adults, self-harm and suicide
Oct 2025	Chloe Rodgers	University of Manchester	The impact of light exposure on wellbeing
Nov 2025	Dr Katie Marwick	University of Edinburgh	The menstrual cycle as an overlooked sign in psychiatry
Nov 2025	Dr Nathan Hodgson and Nabeeha Khokhar	University of Warwick	Improving mental health services for Muslims
Jan 2026	Isabel Cooper	Oxford Brookes University	Pelvic floor health in women from racialised communities
Feb 2026	Cerys Reiger	University of Manchester	Diabetes research and barriers to accessing digital healthcare in older people
Feb 2026	Dr Carol Opdebeeck and Dr Verity Long	Manchester Metropolitan University	Risk factors for developing dementia and how risk can be mitigated in midlife
Mar 2026	Hannah Frost	University of Manchester	AI and decision-making in healthcare

As is the desired intention, the webinars gave rise to a range of pertinent actions and change progressed in Big Life, as follows:

- Our approach to suicide prevention was strengthened by moving further away from checklist style risk prediction and towards compassionate, collaborative safety planning, informed by concepts such as acceptance of suicidal thoughts and feelings.
- Staff engagement was increased with innovative therapeutic approaches (for example, attachment informed and alternative, less medicalised models of care) and in participation with externally led research trials.
- There was deepened understanding of how acquired brain injury, alcohol use and other physical health issues can affect engagement with services, informing more nuanced responses to non attendance and opportunities for psychoeducation.
- A more holistic view of physical health in mental health work was discussed and profiled, including awareness of menstrual and menopausal mental health, pelvic floor health, mid life dementia risk factors, diabetes and barriers to health care for older adults.
- Awareness of the need to integrate environmental and lifestyle factors such as light exposure into both client work and thinking about trauma informed environments was heightened, with plans for practical guidance and resources for staff and service users developed.
- We further developed our culturally responsive practice by focusing on the needs and experiences of Muslim communities and on establishing psychologically informed communication channels, including being afforded the opportunity for Muslim clients accessing our talking therapy services to access an app aimed at improving acceptability over a 3-year period.

And almost without exception, post webinar, topic summaries were created and internal guidance developed to disseminate learning across the organisation.



# BUILDING INTERNAL RESEARCH EXPERTISE AND CAPACITY

This year, we developed and delivered a growing internal research programme that has entailed building both expertise and capacity across the organisation, despite the lean size of our core research team. We are increasingly positioning research not as a specialist, isolated function, but as a shared organisational asset that informs practice, strategy and innovation, while also furthering our profile and influencing ability.

Over 2025/26 we have also continued to nurture interest in research among staff across services, actively encouraging colleagues who have expressed a desire to get involved to contribute directly to primary research projects already underway. This has included supporting staff to engage in data collection, interpretation and dissemination, and beginning to create clearer pathways for people to develop research skills alongside their substantive roles.

Our internal research focus has continued to mature, with a particular attention, as already outlined, on consolidating and extending work around our HeaRRT offer. This includes progressing publication of the initial concept paper and strengthening the evidence base by expanding the sample size, as well as preparing for compilation of a specific manuscript on how the group was adapted for individuals from South Asian communities, and the learning generated through that process.

We have similarly made significant headway in evidencing the impact of our coaching and social prescribing services in supporting people with common mental health problems. Building on routine outcomes data and targeted evaluation activity, we aim to publish a paper on this work in the forthcoming research year, adding to the evidence for non clinical, community based approaches in the management and support of a range of conditions.

Alongside this, we have recently showcased a substantial piece of grassroots, practical research undertaken within one of our social prescribing services, funded by Natural England, a statutory body. This work has just been very positively highlighted nationally within a research group hosted by the University of York on green initiatives, and we intend to write up the findings for academic publication so that learning from this project can inform wider practice and policy in the nature based interventions space.

We continue to shape our identity as a research informed organisation, broadening our repertoire and expertise so that we not only collaborate with a wide range of external research partners, predominantly universities, but also design and deliver our own primary research. This dual approach strengthens our ability to test, refine and evidence the Big Life Way and to demonstrate how our integrated, multimodal approach differs from more stand alone models used elsewhere.

Our external engagement remains extensive, including active involvement in networks such as the Global Health Connector and Health Services Research UK. We have maintained strong links with the Centre for Social Responsibility at Edge Hill University, continued engagement with the International Society for Research on Internet Interventions, and initiated new relationships with the School for Social Care Research, submitting an evaluation grant application which, although unsuccessful, yielded valuable learning and high quality contacts for future collaboration.

Our Research Director continues to play a visible role in the wider academic and practice community, including through the role of visiting university research fellow and, active member of a well-regarded journal editorial board, alongside regularly being approached to undertake peer reviews for academic journals across the world. Additionally, they have also been approached to lead a global topic group for a prestigious journal; an opportunity we expect to progress over the coming research year, and which would likely strengthen the organisation's profile and standing in the research and mental health field.

A key strand of the organisation's internal research ambition is to better evidence The Big Life Way – how our values, methods and multimodal practice translate into outcomes for the people and communities we work with. To this end, we are increasingly focused on capturing and analysing how this way of working differs from more traditional or single modality approaches in other organisations, and what this means for engagement, equity and impact. To that end, work on the Multi-Modality Practitioner initiative has continued to progress, with further publications planned in the next research year.



# SUPPORTING AND COLLABORATING WITH EXTERNAL RESEARCH GROUPS

Collaborating with, and supporting, a diverse range of external researchers continues to be integral to our mission and impact. These partnerships bring fresh insight to our work, while our contribution helps to ensure that research remains grounded in real world issues and delivers tangible benefits for the people we work with and the communities we serve.

By working alongside external research partners, we gain access to new evidence, innovative methodologies and specialist expertise that can inform and improve our services, as well as enhance our credibility. These collaborations also support the sharing and translation of knowledge, making research findings more accessible and relevant to practitioners, decision makers and people with lived experience.

Crucially, these relationships foster mutual learning, drive innovation and create opportunities for co designed projects that align academic priorities with community needs, ultimately strengthening our collective ability to drive positive change. Over the past year, we have been approached by, supported and continued to collaborate with a wide range of external researchers and research projects, reflecting growing recognition of our organisation as a valued and trusted partner in this space. Collaborations included:

- **Using patient-led appointment scheduling to improve cost-effectiveness, access, and patient satisfaction in NHS Talking Therapies services:** A feasibility study with the University of Manchester evaluating the use of patient-led scheduling for Step 2 NHS Talking Therapies services, exploring whether it increases access for underrepresented groups, improves service user satisfaction, and is more cost-effective. Big Life has been a partner in delivering this project.
- **Self-Attachment Technique and Self-Initiated Humour 8-week SAT intervention for learning Self-Initiated Humour:** A trial led by Imperial College London that Big Life staff (and clients) were invited to participate in, either to learn the technique (as an observer), or to access the service for support with anxiety or depression.

- **Why do young people with psychosis kill themselves?** Understanding the mechanisms underlying social interpersonal relationships, resilience, and suicide in people with early psychosis. Big Life collaborated with this study by colleagues from the University of Manchester via being part of the project's steering group over a sustained timeframe.
- **ACORN II perinatal mental health research:** A follow up to a feasibility trial (ACORN I) led by the University of Exeter that Big Life part-delivered, aiming to establish the effectiveness and acceptability of a brief intervention for reducing maternal anxiety during pregnancy.
- **Research by the University of Manchester** examining how light exposure affects mood in people with depression and anxiety, contributing to new approaches to improving mental health and wellbeing. Big Life assisted with recruitment activities.
- **Improving mental health services for Muslims (EveryStep App) – The University of Warwick:** The team here have produced digital multimedia resources including an app to address worries, concerns and barriers for British Muslims who have signed up for NHS Talking Therapies but are at risk of dropping out before benefiting.
- **Pelvic floor health and women from racialised communities PhD project – Oxford Brookes University:** Raising awareness of pelvic floor health for women aged 18–45, including development and feasibility testing of a tool to improve knowledge (for example, about incontinence). Big Life assisted with recruitment activities.
- **Soteria project study led by Greater Manchester Mental Health NHS Foundation Trust:** Exploring people's views on alternative ways of supporting people that do not involve psychiatric inpatient admission, and the barriers and facilitators to setting up such alternatives in the UK. Big Life assisted with providing expert input via a focus group activity.



# THE FUTURE

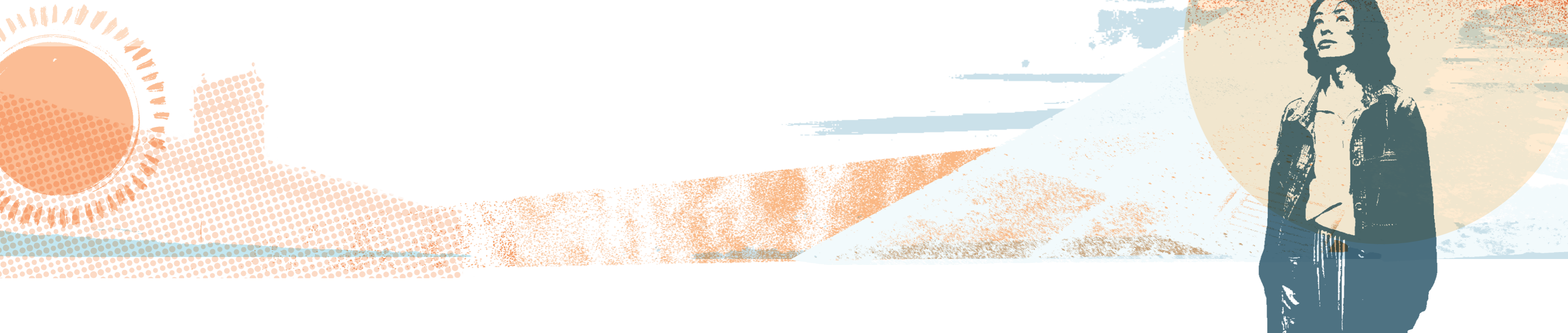
In the forthcoming research year, we plan to consolidate and extend our programme of work, with a strong focus on publication, influence and widening internal engagement in research.

- We will publish findings on the impact of our Multi-Modality Practitioner approach, evidencing how this way of working supports people with diverse and complex needs. We will also publish on the outcomes and learning from our work on green spaces and nature based interventions, contributing to the growing evidence base on green and outdoor approaches to health and wellbeing, while seeking to identify opportunities to expand our service and research offer in this space.
- We will continue to highlight and share our research informed journey with other third sector organisations; openly sharing our learning about what it takes to build research capacity, culture and infrastructure in the third sector.
- We will publish further work on trauma informed organisational change, including the development and use of our bespoke audit tool, as well as on our wider public health and “whole person” approaches and their ability to meet a broad range of needs.
- We will also develop a clear matrix of opportunities for staff and volunteers across the group to get involved in research and evaluation activities. This will support a more systematic approach to building research skills, nurturing interests and embedding inquiry minded practice across different services and roles.

# FINAL WORDS

Our expanding research portfolio is having a clear and tangible impact on how the organisation is viewed locally, nationally and within academic and policy circles. As we design and deliver our own primary studies, contribute to high quality evaluations and publish in peer reviewed journals, we are increasingly recognised as a third sector organisation with considerable expertise in both research and service innovation, rather than solely as a provider of frontline support.

Taken together, our involvement in national and international research groups, invitations to speak and collaborate, and the visibility of our findings, are collectively strengthening Big Life’s reputation as a credible, evidence driven organisation that combines robust methodology with high quality, person centred service provision.





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# THE BIG LiFE GROUP

We fight for equity –  
in health, in wealth and in life.

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