10 YEAR IMPACT REVIEW
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challenge inequalities within research, engage diverse groups of people and champion the voices of people with lived and living experience and, most importantly, have a tangible, real positive impact on people’s mental health.

We have achieved this and more. MQ has supported research projects across six continents. We have grown the workforce by investing in early career researchers and convening partnerships. We have made discoveries that have transformed our understanding of how different mental illnesses develop, how they can be treated and even how they can be prevented.

Conversations have changed since MQ was founded. Whilst some used to scoff at the mere mention of mental health struggles, others would brush those discussions off, ashamed of how they felt or fearful of what might be mentioned. Now people are much more open, and I attribute that in part to our increased understanding of what mental illnesses are – and are not.

But we must do more. 1 in 4 people will be impacted by a mental illness in some way this year. Since the pandemic, it is becoming apparent that there is a growing crisis among children and young people – the first generation to grow up in the era of smart phones, social media, austerity and a pandemic. Is it any wonder that they feel anxious?

This is why we must continue to further our understanding of how we can protect people’s mental health. How we can prevent illnesses from manifesting and how we can identify and support those who are at greatest risk.

Looking back on what we have achieved in just 10 years, I feel positive about the shape of MQ’s future. We will continue to be innovative. We will continue to take on challenges and ask the big and sometimes difficult questions.

As an agile organisation with a network of the brightest and best scientific minds to lean on, I look forward to what MQ can continue to achieve.

Much has changed since MQ was founded. The UK has had five prime ministers, we have lived through a pandemic and now face an uncertain future. But one thing is for sure – at MQ, we will continue to grow, follow the evidence and advocate for positive change.

To all who made this journey so far possible, thank you. I hope you will continue with us through the next ten years.

Lea Milligan
CEO, MQ Mental Health Research
MQ is an award-winning organisation that exclusively funds research into mental health conditions globally.

By taking an impact-focused, multi-disciplinary approach, MQ researchers are helping to change the way we talk about, treat and prevent mental illnesses.

MQ is an impact-focused funder, meaning we do not only seek to grow scientific knowledge. We work across sectors, including policy, industry, healthcare and beyond the mental health sector, to ensure this knowledge is used in real life and brings transformative effects in mental health, allowing more people to live happier and healthier lives.

In the last 10 years, MQ has:

- MQ researchers have published 421 papers (including pre-prints)
- MQ has invested £30 million in supporting research
- MQ has engaged over 42,000 people to take part in research
- Funded or supported 65 research projects across six continents
- Funded research at 40 institutions globally through our grant programmes
- The detection and diagnosis of mental illnesses have accelerated, treatments have improved and we are more aware of how we can prevent mental illness from developing in the first place.

38% of MQ’s studies have been prevention-focused

35 of MQ’s 65 projects directly challenge inequalities in mental health and mental health research (read more on page 24)

For every £1 MQ has invested in supporting research, an additional £5.78 has been generated

48% of MQ’s studies have led to new treatments being developed

10 YEARS IN NUMBERS

THE NEED:
1 in 4 people are impacted by mental illness but our understanding of these conditions is way behind where it should be.

THE ACTIVITY:
MQ has funded 54 mental health studies worldwide, co-partnered on 7 projects and convened or consulted on another 4.

THE OUTCOME:
63% of MQ’s studies have raised public awareness, 30% have led to changes in policy and regulation, 40% have led to changes in practice and 100% of our co-partnered & convening projects have influenced mental health funding.

THE IMPACT:
The detection and diagnosis of mental illnesses have accelerated, treatments have improved and we are more aware of how we can prevent mental illness from developing in the first place.
MQ’s first groundbreaking concept of ‘Mental Health Science’

MQ’s first three Fellowship grants are awarded:

Dr Susanne Ahnaci, (USA) identified brain activity related to Obsessive behaviours, the first step towards developing new treatments for OCD.

Professor Bronwyn Graham, (Australia) found that women with anxiety, who had low levels of the hormone oestrogen, were less likely to get better – and stay better – following psychological treatment. This means that if we can schedule treatment when oestrogen is highest, it could end up being more effective.

Dr Joshua Roffman (USA) found that by increasing the consumption of folic acid during pregnancy, changes occur in children’s brain development, thus reducing the incidence of psychotic symptoms in later life.

MQ makes the case for the need for investment in child and adolescent mental health.

MQ identifies the need for investment in psychological treatments and convened an expert meeting of multi-disciplinary experts to discuss opportunities – the first of its type.

MQ opens its office doors on the 2nd of January 2013

The MQ fellowship was transformational. This study would have been too high-risk for conventional funding. MQ has enabled research that may result in measurable impact in prevention of mental illness in young people.

Dr Joshua Roffman, USA, MQ Fellow, 2013

MQ announces nearly £3 million in research grants including 4 more MQ Fellowships:

MQ worked with the James Lind Alliance and several other charities to engage the public on a research priority-setting project. The public survey received over 3000 responses.

MQ’s first groundbreaking paper is published: Psychological treatments: A call for mental-health science establishing the concept of ‘Mental Health Science’ (read more on page 10).

MQ supports the scientific community to engage the public with my research and gave me the tools to do so.

Dr J Joshua Roffman (USA) was the first of its type with MQ Fellows to be engaged in public sector activities. It is transformative to engage the public that way.

Dr Joshua Roffman, USA, MQ Fellow, 2013

MQ’s first groundbreaking concept of ‘Mental Health Science’, the public on a research priority-setting multi-disciplinary experts to discuss opportunities – the first of its type.

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Grants by Impact area

INVESTING IN IMPACT

MQ recognised early on that the research that was carried out on mental illnesses was siloed, often focused on understanding conditions as opposed to finding solutions for them, and of course, underfunded.

One of the earliest activities MQ undertook was to convene a meeting of experts from many different scientific disciplines. This led not only to the groundbreaking paper published in the journal Nature, but in a commitment from MQ to be an impact focused funder.

This in turn led to convening international researchers from psychological sciences and so forth, who worked together for almost three years to create The Lancet Psychiatry Commission on psychological treatments research in tomorrow’s science.

This work went on to be picked up by the Wellcome Trust.

By investing in research that drives innovation in treatments and interventions, policy and practice MQ is helping to save and change lives.

The growth of Mental Health Science

Silos in science and medicine have always existed. Researchers in neuroscience would not regularly interact with experts in psychology, nor biologists with data scientists, and collaborative research was rare.

This meant that there had been limited progress in developing mental health knowledge in the past 60 years. Several disciplines were needed to understand the issues while research was often being carried out independently by each.

Over the last 10 years, MQ has worked to convene the mental health research sector and bring these different research disciplines together to share knowledge and best practice, and to collaborate under the umbrella discipline of ‘Mental Health Science’.

MQ hosted international meetings and the diverse profile of its funding has brought together experts from separate disciplines, including psychology, neuroscience, genetics, physics, statistics, geography, anthropology and many others, including researchers, clinical practitioners and experts by experience. This diversity drives both efficiency and innovation.

MQ-funded projects study a wide breadth of conditions and connects researchers.

This means the researchers MQ fund can learn from each other, making advancements in mental health science swifter and more effective. Mental health conditions often interlink. Approximately 9 million people worldwide have co-occurring conditions. Therefore, breadth of study leads to the ability to interlink and learn from one condition to the next.

MQ’s funding approach was described as “a brilliant balancing act” by The Wellcome Trust, one that other charities cannot achieve due to a narrower focus on specific aspects of mental health.

INTERVIEW

Cynthia Joyce, Founding CEO of MQ and Science Council member

When we began MQ ten years ago, it was a different time. Mental health was viewed in a very different way. We had a long way to go. But we had ambition and believed we could change the landscape of mental health research.

Back then, mental health research was barely discussed let alone funded. The sad reality is it is still underfunded. Unfortunately, funding is still at the same levels it was when MQ started 10 years ago, with less than 7% of any national research budget.

However, there is hope. MQ is leading and facilitating more discussion at an international level.

How are we doing this? MQ is focused on raising the awareness of the need for more research funding and is addressing the need for the field to work differently.

This means changing the mental health research landscape in a number of ways. MQ is improving and facilitating an international approach to research. MQ is placing emphasis on more patient and family involvement. MQ is focusing on research being translated faster and more effectively to clinic treatment. MQ is addressing the worldwide problem of lack of care by encouraging the need to sponsor transformative work on digital, community-based therapy.

The MQ Foundation, founded by MQ trustee John Hems in 2019 in the US, makes MQ the only mental health research charity operating with a physical international presence. At the time, MQ was the only mental health research charity operating with a physical presence worldwide.

MQ has been at the forefront of major developments over the last 10 years. In my view, key areas to note are:

Social media – connecting people with mental health problems and providing a platform to share information that before now was not commonly shared.

Young people – encouraging a cross-generational conversation about improving mental health interventions and, in fact, that conversation has seen young people taking a lead in all areas – at home, in school and at work. Young people are the key to mental health improving worldwide in the future. It’s the reason we exist as a charity, and they are who we exist for.

Global Pandemic – The global pandemic increasing risk of SMI; increasing social connectedness; pausing conventional research.

MQ on the front lines of rethinking research priorities (read more on page 35).

Interdisciplinary research – instead of researchers working separately, they are encouraged to work together, and facilitated by MQ’s work to do so.

Synchronous International research – building on that interdisciplinary idea is connection between researchers worldwide. When research connects, we can do so much more (read more on page 18).

MQ’s biggest impacts include breaking down silos in mental health research and shining a light on several important fields.

• The effectiveness of talking therapies – particularly for basic scientists and psychiatrists;
• Predictive modeling for talking therapies;
• Equality and at the same time, work showing that differences matter such as gender or social disadvantage;
• The need for interdisciplinary and cross-disciplinary approaches;
• Demonstrating that people affected by mental health problems WILL support a mental health research charity.

Major changes in research approaches to ill-health take time. Our grand experiment of a mental health research charity is barely underway, but vital, perhaps more so now than ever before. Certainly, I am more hopeful than ever before that MQ will become the world’s leading mental health research charity.
Anxiety is a normal feeling, it’s our brain’s way of reacting to stress and alerting us when we are in danger. However, when regular and disproportionate anxiety and fear overwhelms us and interferes with our ability to live life fully, this could be an anxiety disorder.

Anxiety disorders are the most common mental health disorder. Around 10 million people in the UK alone are affected. Only 15% of those people are receiving treatment. And only 21p is spent each year for every person affected in the UK.

MQ Fellow, Dr Andrea Reinecke, from Oxford University, is working to develop more effective treatments for anxiety and panic disorder. Using a logical, neuroscience-based approach, her team’s work has already shown that just one session of her cognitive-behaviour therapy has fantastic effects on anxiety.

Now, Andrea and her team are building on this previous clinical and lab research. This involves refining the single-session CBT treatments, to understand more about why CBT can reduce anxiety, and to ensure the rapid treatment is as effective as possible.

They are also testing to see whether a blood pressure drug could also be used in combination with the CBT treatment to further treat symptoms of anxiety and panic attacks.

Research projects like mine are only possible with funding and sadly there just isn’t enough of it. Because of this, our understanding of how anxiety develops and how it can be prevented is nowhere near where it needs to be. That is why the work of MQ Mental Health Research is so incredibly important to help us further our understanding of anxiety disorders and other mental health conditions, so that we can develop more effective interventions for the 1 in 4 of us who will be affected at some point in our lives.”

Dr Andrea Reinecke, MQ Fellow 2014

Chrissie took part in Andrea’s study:

“My anxiety/panic attacks started when I was aged 25. I am now in my 70s. My life was turned upside down due to them. I became seriously depressed and constantly in fear. I was unable to go on a train or any kind of public transport for fear of an attack and I stopped socialising with friends.

Many years later, I saw an advert in the Guardian newspaper looking for people with my condition to volunteer for a research trial. I jumped at the chance.

I can honestly say my life has been completely turned around. Since the treatment I have been able to do so much more without the constant fear. Travel, theatres, cinema, holidays and even a gliding experience for my 70th last year!

I cannot express just how grateful I am to Andrea and her work. She has given me an escape from a terrible illness that I never believed was possible. With my whole heart and endless thanks, I hope and trust she can continue to help others as she has me.”

Dr Andrea Reinecke
MQ supported a risky study that is transformative and now very successful. MQ were patient, raised my profile considerably and gave me experience with engaging philanthropy.

Dr Claire Gillan, MQ Fellow 2016

MQ launches its first ever national fundraising and awareness campaign: We Swear

The Research priorities for Bipolar research paper, with James Lind Alliance is published

MQ Data Science working group announce a call for applications

THE OUTCOME: MQ supported Jen Wild’s study which led to the development of her intervention to treat PTSD.

THE ACTIVITY: Jen developed the SHAPE Recovery programme with a 90% success rate in reducing PTSD symptoms.

THE NEED: Frontline healthcare workers are significantly more likely to develop symptoms of PTSD than the general population.

THE IMPACT: A revolutionary treatment to help people recover from PTSD.

A revolutionary treatment to help people recover from PTSD.

“Work-related stress was at an all-time high for me and my peers during the COVID-19 pandemic. Fortunately, the programme mitigated that stress significantly. For this I am eternally grateful.”

Participant from Dr Jennifer Wild’s study

(Read more about the COVID Research Priorities Paper on page 35)
ENGAGING PEOPLE

Whether it’s convening experts to share knowledge, championing the voices of people with lived and living experience or investing in research all around the world, listening to diverse voices and engaging people is at the core of MQ’s work.

The research priority-setting work that MQ conducted with the James Lind Alliance invited members of the public who lived with mental illness to share the questions they most wanted answering. This priority setting into depression research was just the first of many priorities setting projects that MQ carried out.

- DARQ – Depression: Asking the Right Questions;
- Bipolar Research priority setting project in partnership with Bipolar UK;
- Adolescent Research – in partnership with McPin;
- Health Technology – “Asking the Right Questions” in partnership with MindTech at the University of Nottingham.

MQ innovates the process of research. Our Participate platform has facilitated studies driving expediency and cost-effectiveness by involving volunteers and connecting them directly to researchers. This makes taking part in research easier for the public and gaining volunteers easier for researchers (read more about Participate on page 33).

In 2023, to celebrate MQ’s 10th birthday, we launched #ResearchAppreciationDay which now takes place on the 5th of July each year.

Across all MQ’s social media channels, newsletter subscribers and website visitors, we reach an audience of over 463,000 followers.

75% of MQ studies involved or were co-produced by patients and the public with experience of mental illnesses.

Patient and Public Involvement

Involving people with lived experience of mental health conditions in the design, planning, operation or dissemination of research is paramount in MQ’s work. Mental health conditions cover a broad spectrum of thoughts, feelings and behaviours, and since these are very personal, no two people’s experiences of mental illness will be identical. Therefore, science and research into mental health must involve the voices of those living with the conditions.

Of MQ-supported studies, 75% involved people with lived experience or practitioners, commissioners or other key stakeholders, a practice referred to as Public and Patient Involvement and Engagement or PPIE. In contrast, only 61% of researchers had included PPIE in previous studies.

Today, all our research is commissioned, designed and delivered with experiential advisors at every stage.

In MQ-supported studies, people with lived experience have been involved in various stages of studies:

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<th>Stage</th>
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<tr>
<td>Design</td>
<td>92%</td>
</tr>
<tr>
<td>Delivery</td>
<td>96%</td>
</tr>
<tr>
<td>Evaluation</td>
<td>92%</td>
</tr>
<tr>
<td>Sharing</td>
<td>90%</td>
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<tr>
<td>Results</td>
<td>91%</td>
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The impact of encouraging researchers to involve people with lived experience of mental health conditions in the formation of studies, is highly notable.

- 81% of researchers who included PPIE said they believed it would make the research more valuable;
- 96% of those including PPIE said it improved their work;
- 0% reported a negative impact of PPIE on any part of the process;
- 92% said they would include PPIE in future research even if it wasn’t a requirement of the grant;
- Most researchers said they had learned to include PPIE earlier in studies, if not from the very start.

MQ has provided multiple opportunities to connect with families with lived experience. This has proved very fulfilling and helped me keep patient needs as my north star.”

Professor Petra Vértes (UK) MQ Fellow 2017

“MQ has provided me with multiple opportunities to connect with families with lived experience. This has proved very fulfilling and helped me keep patient needs as my north star.”
Professor Petra Vértes (UK) MQ Fellow 2017

“I learned about Public and Patient Involvement and Engagement through my involvement with MQ, and therefore included it in subsequent research projects.”

Dr Susanne Ahmari, MQ Fellow 2014

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- 0% reported a negative impact of PPIE on any part of the process;
- 92% said they would include PPIE in future research even if it wasn’t a requirement of the grant;
- Most researchers said they had learned to include PPIE earlier in studies, if not from the very start.

MQ has provided opportunities for its researchers to involve the public and patients in their research, with a big emphasis placed upon the involvement of young people. One aspect of this was the formation of the MQ Young Persons Advisory Panel, a collective of young people with lived experience of mental health conditions and experiences.

THE NEED:
Mental health research did not historically involve people with lived experience in the design or the implementation of the study.

THE ACTIVITY:
MQ encouraged researchers to include PPIE - 75% of whom did.

THE OUTCOME:
Huge majority of researchers reported positive outcomes for including PPIE in their work.

THE IMPACT:
People with lived experience of mental illness are more represented in research and better outcomes are achieved.
CONVENING THE SECTOR

MQ Mental Health Science meetings

In 2015, MQ convened the very first MQ Mental Health Science meeting. With guests and speakers from all around the world attending, the two-day conference saw talks on the opportunities for research on young people’s mental health, calls for improved treatments and a showcase of exciting new research techniques.

These meetings became an annual event and grew in popularity, with attendance doubling from 100 to 200 between 2016 and 2017. Tickets for the 2018 meeting sold out months in advance. By 2019, the meeting was one of the largest internationally, dedicated solely to mental health science.

The COVID-19 pandemic put a stop to the in-person conference but, by moving the event online in 2021, MQ was able to utilise new technologies and bring the conference to an even wider global audience. This meant that attendees from LMICs were able to not only watch the talks from researchers and keynote speeches, but also present their posters and interact with each other in the online chat spaces.

In 2022, the meeting once again was transformed into a five-day online festival on mental health. Engaging 405 attendees from 37 countries during the festival, with a further 243,703 impressions online through social media and watch-again content (read more about engaging people on page 16).

The mental health science community has not only responded positively to these meetings, with 95% of attendees giving positive feedback about the 2022 Festival, but the impact speaks for itself.

75% of the attendees who were asked said that they either already had, or would be, connecting with another attendee to collaborate and share knowledge.

By convening these meetings, MQ has helped to foster collaborations among scientists of different disciplines, mental health stakeholders and policy makers – bringing them together to explore the biggest challenges in the sector.

“MQ is a broad tent that recognizes that no one scientific discipline, training background, or disease-based ‘silo’ is enough to make a difference. Other organisations are nowhere near as broad in their funding profile. MQ brings together a wide range of specialists from different areas, with a driving focus on impact, especially for young people.”

Dr Joshua Roffman, MQ Fellow 2014
In 2015, MQ supported Dr Ethel Nakimuli-Mpungu who was running a ground-breaking study that would change the lives of people living with both depression and HIV in remote regions of Uganda.

A culturally sensitive group psychotherapy programme run by lay healthcare workers was developed by Ethel, one of MQ’s first Fellows. The programme works in a multilayered approach that has helped those who previously were isolated with little to no access to therapy. The holistic approach of Group Support Psychotherapy (GSP) not only addresses emotional challenges but also tangible life issues. A male GSP participant remarked, “Last year, at around this time, I had not paid fees for my children. Now, I no longer have a school fees problem. My relationship with my wife has improved.” This highlights the program’s multifaceted impact, from improving mental well-being to enhancing interpersonal relationships and economic stability.

The early consultation process identified that poverty was a significant issue for those living with HIV; so income generation skills were included in the programme. These were a key reason for high attendance rates during treatment, and for its appeal with both men and women.

Better yet, those who received the treatment have seen a significant improvement in their standards of living, most often being lifted out of poverty coupled with improved physical health. The positive effects of GSP on viral suppression among PLWH were mediated by a reduction in depression symptoms, better adherence to ART, and overall improvement in virus suppression than those using group HIV education and were more likely to remain depression-free 2 years after treatment.

Our hypothesis was proved correct. Participants in the study had greater reduction of experiences of depression after 6 months than those using group HIV education and were more likely to remain depression-free 2 years after treatment. The early consultation process identified that poverty was a significant issue for those living with HIV; so income generation skills were included in the programme. These were a key reason for high attendance rates during treatment, and for its appeal with both men and women.

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“Ethel Mpungu’s work is an amazing example of interdisciplinary thinking. MQ has been catalytic for what she’s done and what she’s done is catalytic not only for Uganda but far beyond.”

Professor Emily Holmes, MQ founding trustee

(Read Emily’s interview on page 36)

For me, being an MQ fellow gave me visibility in local communities, nationally and internationally. Prior to the MQ award, I had acquired research skills from my PhD training at Johns Hopkins University and had some research field experience. But without any significant funding, I felt that I was all dressed up with nowhere to go. Winning the MQ award gave my research career a new lease of life.

Before this study, most people living with HIV AIDS in northern Uganda woke up every day feeling worthless, useless and hopeless without interest in work, unable to feed or educate their children, and many spent most of their day drinking alcohol. These people had depression but did not know this. Access to first line psychotherapy for depression was limited. Previous research has shown that untreated depression is associated with several negative public health consequences including affecting work, leading to disability and poor HIV treatment outcomes.

We knew that HIV care providers visited isolated communities to care for people living with HIV AIDS, so we trained these health workers to recognise and respond to depression by delivering group psychotherapy.

These health workers in turn trained community health workers to do the same. We hoped this would lead to a sustained and greater reduction in depression than Group HIV education and this would be how income for these individuals would be improved as well as suppressing their virus.

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The intervention is being rolled out across many nations helping the estimated 25 million people living with HIV in Africa.

“Ethel Mpungu’s work is an amazing example of interdisciplinary thinking. MQ has been catalytic for what she’s done and what she’s done is catalytic not only for Uganda but far beyond.”

Professor Emily Holmes, MQ founding trustee

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These health workers in turn trained community health workers to do the same. We hoped this would lead to a sustained and greater reduction in depression than Group HIV education and this would be how income for these individuals would be improved as well as suppressing their virus.

Our hypothesis was proved correct. Participants in the study had greater reduction of experiences of depression after 6 months than those using group HIV education and were more likely to remain depression-free 2 years after treatment. The early consultation process identified that poverty was a significant issue for those living with HIV; so income generation skills were included in the programme. These were a key reason for high attendance rates during treatment, and for its appeal with both men and women.

The intervention is being rolled out across many nations helping the estimated 25 million people living with HIV in Africa.

“Ethel Mpungu’s work is an amazing example of interdisciplinary thinking. MQ has been catalytic for what she’s done and what she’s done is catalytic not only for Uganda but far beyond.”

Professor Emily Holmes, MQ founding trustee

(Read Emily’s interview on page 36)

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2017

£3.9m in grant commitments including innovative Data Science programme: (read more on page 15)

Dr Zach Cohen (USA) ran the Stratified Medicine Approaches for Treatment Selection Tournament (SMART), to improve treatment selection for anxiety disorders

Dr Rina Dutta (UK) developed a unique dataset of linked educational and clinical data to better understand suicide and self-harm

Professor James Walters (UK) studied the role genetics play in cognitive impairment in those with schizophrenia and psychosis

Professor Jessica Deighton (UK) used large data sets to identify how treatment services could be better tailored to young people

Dr Aideen Maguire (UK) used population wide data to improve the understanding of the link between access to firearms and suicide in Northern Ireland

Dr Claire Llewellyn (UK) identified some childhood eating behaviours as potentially predisposing risk factors to future onset of eating disorders

Professor Petra Vértes (UK) used genetics to improve understanding of the biological underpinnings of Schizophrenia. (read more on page 46)

Dr Jessica Eccles (UK) found that a novel treatment was effective in reducing anxiety in people who have hypermobility

Dr Teresa Tavassoli (UK) shed light on the relationship between sensory differences and mental health symptoms in autistic children

Dr Simon Kariuki (Kenya) examined genetic samples from African populations to identify a shared genetic risk between epilepsy and mental health disorders

An innovation workshop is held for multi-disciplinary experts to address the mental health challenged children and young people face

MQ produces 3 reports with the London School of Economics making the economic case for better mental health:

- Economic case for preventing bullying
- Economic case for the early identification of psychosis
- Economic case for early intervention and school-based resilience programmes

MQ researchers publish 100 papers in just one year

By the end of 2017 MQ researchers have published 289 papers

Prior to MQ’s support, work (in this area) was sparse and primitive. MQ was instrumental and essential to launch what is now a major thread of research in mental health. We would not have believed how far the field, and our own work, would have come in such a short time.

Dr Zach Cohen, MQ researcher and Professor Robert DeRubeis

Young people’s advisory group launched

Being a member of MQ’s Young Person’s Advisory Group was a fantastic opportunity to input in to MQ’s projects in an environment where the perspective of young people with lived experience was centred and valued.

Matilda Simpson, Member of the MQ YPAG

2018

A groundbreaking policy report published: Young peoples mental health research: Towards a brighter future

4 new Data Science projects are also funded:

Dr Rachel Hillier (UK) used data to map and better understand the mental health needs of young people growing up in care

Professor Liz Twigg (UK) used survey data on adult and children’s mental health, social media use and parent-child relationships to understand how children’s wellbeing is affected

Professor Louise Condon (UK) found that by using routinely collected health data it was possible to make visible the mental health needs of gypsy-traveller populations, one of the most underserved groups

Professor Golam Khandaker (UK) identified inflammation as the link between depression and cardiovascular disease

The Brighter Futures Funding Programme is launched, initially funding 3 major multi-disciplinary studies to support children and young people (read more on the next page)

The HOPES Project
The Adolescent Data Platform
The IDEA project

Supported two research priority setting partnerships (PSP’s) through the James Lind Alliance – one on young people and Research priorities for Digital mental health published in the Lancet

The Data Science Group publish their paper: How data science can advance mental health research in the Journal Nature

MQ researchers publish 100 papers in just one year

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Dr Zach Cohen, MQ researcher and Professor Robert DeRubeis

The 3rd Mental Health Science meeting is held with over 200 attendees – double the size of the previous year

The London School of Economics making the economic case for better mental health:

- Economic case for preventing bullying
- Economic case for the early identification of psychosis
- Economic case for early intervention and school-based resilience programmes

The Brighter Futures Funding Programme is launched, initially funding 3 major multi-disciplinary studies to support children and young people

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Delivering Brighter Futures

The Brighter Futures programme was set up to be completely dedicated to researching and changing the course of mental illness in young people. In 2016 MQ published its manifesto for young people’s mental health which laid out its commitment to the aims of the Brighter Futures programme.

An integral part of the Brighter Futures Foundations phase was the recruitment of the best team and determining the most important questions around mental illness in young people. These steps were vital in finalising the direction and focus of the programme.

In accordance with MQ’s creative and entrepreneurial approach, we conducted a three-day ‘innovation workshop’ for international researchers from diverse fields of study. Here, we asked participants to co-develop pioneering, fundable projects that would most efficiently and effectively address the critical issues in young people’s mental health.

This approach allowed participants to break out of their traditional silos and connect with researchers with whom they would never normally have the chance to work.

This led to the funding of three of MQ’s biggest ever studies. The Adolescent Data Platform, the IDEA project (read more on page 28) and the Help Overcome and Predict the Emergence of Suicide (HOPES) study, run by a multi-national team that analysed data and brain scans from over 9,000 14-to-25-year-olds to identify specific brain mechanisms linked to suicidal thoughts and behaviours.

MQ’s funding landscape report found that only 26% of mental health research money is spent on children and young people.

75% of mental illnesses develop in childhood. 75% of MQ’s grant portfolio has had a focus on improving the mental health of children and young people.

MQ’s Brighter Futures workshop was a unique opportunity and transformative for initiating the global effort to study brain and psychological factors in risk for youth suicide. It was where most of the investigators of our multidisciplinary HOPES (Help Overcome and Prevent the Emergence of Suicide) consortium first met and facilitated the rapid forging of our now longstanding global collaborations.

Receiving the Brighter Futures support for the HOPES consortium was essential for us to then carry out research together generating what we hope are findings that will help in international reductions in youth suicide.

“Research and data is so important in mental health – if we don’t have that, we’re unable to change policies, and we’re unable to provide different services for communities.”

Amazin LeThi, MQ Ambassador

Tackling inequalities

MQ aims to have maximum impact by focusing our efforts on the substantial unmet needs within mental health.

While 14% of the global burden of disease is attributed to mental, neurological, and substance use disorders, most of the people affected - 75% in Low-and Middle-income Countries (LMICs) - do not have access to the treatment they need. Poverty and inequality are a shared factor in the risk of mental illnesses, as well as for ill health in general.

To address these challenges, MQ has led in coordinating efforts across sectors to support those most vulnerable across societies.

MQ puts research to work so that vulnerable groups can flourish.

There is no doubt that socio-economic, racial and gender inequalities contribute to poor mental health. Difficult financial circumstances naturally add to stress which can impact mental wellness. Discrimination whether due to gender, sexuality, race, religion, disability, neurodiversity or other circumstances adds to stress which can impact mental wellness. Easy access to healthcare for both mental and physical health is a privilege without which many of us experience increased stress.

These inequalities don’t just cause and exacerbate mental illness but also act as barriers to high quality research too. Most mental health research is conducted in high-income countries, particularly the UK and USA. MQ is a global research funder and has supported research on six continents, including in LMIC’s. Our collaborations with LMIC-based organisations are based on the principles of ownership, alignment, mutual accountability, and knowledge sharing, which are reflected in all of our projects.

“The MQ’s Brighter Futures workshop was a unique opportunity and transformative for initiating the global effort to study brain and psychological factors in risk for youth suicide. It was where most of the investigators of our multidisciplinary HOPES (Help Overcome and Prevent the Emergence of Suicide) consortium first met and facilitated the rapid forging of our now longstanding global collaborations. Receiving the Brighter Futures support for the HOPES consortium was essential for us to then carry out research together generating what we hope are findings that will help in international reductions in youth suicide.”

Professor Hilary Blumberg, Yale School of Medicine and MQ Science Council member
THE NEED: Huge inequalities exist in mental health research. For example: research for young people is underfunded & most research is conducted in high income countries.

THE ACTIVITY: MQ actively funds projects in lower-to-middle income countries and focuses funding on young people’s mental health.

THE OUTCOME: More diverse data is collected and made available for global researchers leading to better understandings.

THE IMPACT: People who are worst affected by mental illness are better represented in research and mental health care and treatment is improved.

“Thanks to MQ, in addition to addressing the objectives and answering our research questions, we uncovered new insights and questions about unpacking the role of structural inequalities in research.”
Professor Jessica Deighton

“The need is for more diverse data, which MQ is building.”
Trevor Harris, MQ Ambassador

RESEARCH OVERVIEW: Tackling inequalities

Grants by goal
- Interventions
- Inequalities
- Physical and mental health
- Children and young people

“MQ are putting in extensive work to bring new ground-breaking research to the forefront to improve lives.”
Tommy Hatto, MQ Ambassador
At least 1 in 5 people experience depression in their lifetimes, and often it starts early in life. Early intervention can help prevent strain on services, individuals’ lives and can even prevent loss of life. But how can you identify the people who would most benefit from early intervention services?

The IDEA or Identifying Depression in Early Adolescence, project was an ambitious multi-national and multi-discipline project that aimed to better understand how cultural, social, biological and environmental factors lead to the development of depression in 10-24 year-olds across the UK, Brazil, Nepal, New Zealand and the USA.

The project went on to successfully develop a tool that can be used to predict which young people are at greatest risk of developing depression in later life.

The project also developed cutting edge techniques through the use of biomarkers, to monitor mental health in adolescents through digital technology and passive monitoring.

The principal investigators Professor Valeria Mondelli and Dr Christian Keeling explain more:

“MQ and the Brighter Futures team funded the IDEA Project and continued to support us, allowing significant expansion of our work and bringing us a few steps closer to reducing the global burden associated with adolescent depression,” says Professor Valeria Mondelli, Clinical Professor of Psychoneuroimmunology at King’s College London.

“The IDEA team has worked nonstop to develop an easy tool which will help us to identify adolescents who had a higher risk of developing depression. We have now achieved this, thanks to MQ.

Now we are excited about the next stage - developing prevention programmes for those adolescents. These programmes could stop the development of depression and potentially other mental health problems in these young people.

From the IDEA project, we learned that the brain and body respond differently to stress in these adolescents at higher risk to those who are not going to develop depression. This very important finding will help us develop more tailored and individualised treatment. This could increase the number of adolescents who respond to treatment in the future.

The IDEA project is continuing to investigate the role of inflammation in the development of depression. Recently we found that inflammation and biological sex may have a combined contribution to the risk for depression.

We know that adolescence is a key time when many mental disorders first develop, and by identifying which inflammatory proteins are linked to depression and how this is different between boys and girls we hope that our findings can pave the way to understanding what happens at this critical time in life. Our research highlights the importance of considering the combined impact of biology, psychology and social factors to understand the mechanisms underlying depression.”

“MQ’s support for this research has helped to transform and improve the lives of so many in future generations.”

Professor Valeria Mondelli

“The MQ Brighter Futures grant had a transformative impact at the adolescent depression programme I direct in Brazil. In addition to all the scientific advances, I would like to stress how important the support was for the development of a new generation of mental health researchers in Brazil,” says Dr Christian Keeling, Associate Professor of Child Adolescent Psychiatry, Universidade Federal do Rio Grande do Sul, Brazil.

“Almost 50 million adolescents live in Brazil, but most of the research into youth mental health is conducted in higher income countries. Although 9 out of 10 children and adolescents worldwide live in low-and-middle-income countries, only 10% of the scientific publications in the world are produced there.

The IDEA project allowed us to conduct research on adolescent depression where it is most needed, where adolescents live. Beyond that, the risk tool that we developed, called the IDEA risk score, was also tested in other countries. We were able to assess its performance in samples from the UK, from New Zealand, from Nigeria, from Nepal, from Brazil and more recently also from the United States. The differences found are highly valuable.

This is a unique opportunity to compare samples from 5 different continents which will allow us to disentangle cultural influences that contribute to the risk for developing depression globally. This means we’ll be able to understand the risk far and ultimately prevent and decrease the burden associated with adolescent depression across the globe – and it isn’t possible without MQ’s support.”

“The MQ project went on to successfully develop a tool that can predict which young people are at highest risk of developing depression in later life. Beyond that, the risk tool that we developed, called the IDEA risk score, was also tested in other countries. We were able to assess its performance in samples from the UK, from New Zealand, from Nigeria, from Nepal, from Brazil and more recently also from the United States. The differences found are highly valuable.

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Professor Valeria Mondelli

“MQ funded the IDEA project to better understand how depression develops in young people

The ACTIVITY: MQ funded the IDEA project to better understand how depression develops in young people

The OUTCOME: The IDEA team successfully developed a tool that can predict which young people are at highest risk of developing depression in later life.

The IMPACT: This tool could ensure that the children worldwide are able to get help before they develop symptoms - potentially stopping depression within a generation.
MENTAL HEALTH AND DATA SCIENCE

The UK is a world-leader in collecting health and social data, but this data resource is fragmented and there are many obstacles which often impede scientists from carrying out the complex analyses needed to advance mental health research.

In 2015, MQ convened the first Mental Health Data Science working group to explore ideas about how data could be used for mental health research.

Through the Data Science funding programme, MQ has supported nine data science research projects and funded the Data Science Meetings which brings researchers together to share knowledge and best practice.

The work funded to date has created new resources and new methodologies which allow access and use of population data to drive a step-change in progress on mental health, drastically increasing cost-effectiveness and representation.

MQ has also encouraged and supported its researchers to include people with lived experience in data science-based work, where public involvement has not been customary. Further driving progress in making research more relevant to the people it is aiming to benefit.

“MQ has become a pioneer in harnessing the power of data science for the advancement of Mental Health research, which had previously been devoid of this valuable source of intelligence.”

Dr Rina Dutta, MQ Data Science Programme, 2018-2019

“MQ was one of the first organisations to invest in data science for mental health. They are driving inter-disciplinary work and want to see how research will be applied, how it will leave a legacy.”

Dr Rina Dutta, MQ Data Science Programme, 2018-2019

One of the most impactful projects MQ has supported has been the groundbreaking Adolescent Data Platform (ADP) which brought together anonymised health data from schools, local authorities, NGOs, the Criminal Justice system and the NHS, and made it accessible for research. The Principal Investigator, Professor Ann John, and her team from Swansea University have been analysing the data and presenting their findings to mental health services, policy makers, practitioners and young people. The ADP is helping to improve prevention, detection and early intervention for depression in young people.

“MQ is part of the mental health solution, enabling amazing research which has been historically underfunded. MQ has been pivotal in bringing mental health researchers together. Linking different specialties, and the data they gather, gives a more real reflection of the true triggers and complexity of mental illness.”

Professor Ann John, MQ Trustee

Following the development of the ADP, and drawing on learnings from it’s creation, Ann is now the Director of a new national project, also supported by MQ, called DATAMIND.

The DATAMIND Hub spans the four nations of the UK so that mental health data will relate to all sorts of people. The Hub draws on data from physical healthcare studies as well as mental health, to find the hidden information vital for researchers who are wanting to look at the full picture.

This approach ensures everyone’s voice is heard—even those who do not usually take part in research. DATAMIND also works closely with others doing similar work across different specialisms, such as diabetes and heart disease, in order to understand the links and share experience.

This work makes it easier for researchers committed to mental health to use data in safe, secure, and innovative new ways.

“MQ seed funded research which has led to the creation of an area of study linking genetic and clinical data, and we are now positioned to contribute in a major way and create a valuable resource.”

Dr James Walters, MQ Data Science Programme

THE NEED: Fragmented mental health data is hard to access and analyse.

THE ACTIVITY: MQ pioneered the use of data science in mental health research. Supporting the ADP and now DATAMIND.

THE OUTCOME: The ADP allowed researchers to spot trends in mental health that were otherwise not possible to see, leading to new guidelines being issued in schools around self-harm.

THE IMPACT: Being able to analyse population-level data helps policymakers and healthcare decision-makers better respond to people’s needs.
The MQ Foundation in New York becomes established (read more on page 11)

MQ Open Mind podcast launched and won the ‘Best podcast’ award from the Bupa Mind Media Awards

The largest ever MQ Data Science meeting is held in Edinburgh

Participate launched - an innovative new way researchers can recruit volunteers

UK Mental Health Research Funding Report was published that found that mental health research received 25 times less funding per person affected than cancer research

MQ’s new CEO Lea Milligan is appointed

A 5-year strategic framework is announced

The largest ever MQ Data Science meeting is held in Edinburgh

Participate launched - an innovative new way researchers can recruit volunteers

The COVID research priorities paper is published, becoming the Lancet’s most cited paper of the year (read more on page 30)

MQ partners with PHOSP to support research into the impacts of COVID-19 infection (read more on page 30)

3 data science meetings are held virtually (read more on page 30)

The International mental health research funding report is published with the IAMHRF

MQ has engaged 42,000 people in research

Increased participation in research of volunteers from black and other ethnic minority backgrounds by 43%

54.3% of people recruited through Participate had never taken part in mental health research before

Participation in research

In 2019, MQ launched Participate. A free website where researchers could advertise their studies and recruit volunteers to take part.

MQ has been incredibly helpful in allowing me to reach my recruitment targets. Within days, I had more participants [thanks to Participate] than the previous six months altogether! The team have also been brilliant-responsive and kind in all correspondence.”

Dr Gemma Sharkey (UK)
MQ found that only £9 is spent per person affected by mental illness on research.

In comparison, £228 is spent per person affected on cancer research – 25 times more.

MQ has invested £30m over 10 years in support of research.

**Mapping the funding landscape**

MQ’s Funding Landscape Reports created a common language for the identification and analysis of funding into mental health research, providing for the first time a consolidated view of how much has been spent on mental health research in the UK.

Critically, MQ was also able to show how funds had been invested - by types of research, by condition and by age group studied. The 2014-2017 report showed that there had been no increase in funding between 2008 and 2017, and that only £9 is spent on research per year for each person affected by mental illness. Worryingly, only 26% of funding goes towards projects on children and young people, despite 75% of mental illness beginning before the age of 18.

The methodology has been further developed and applied by the International Alliance of Mental Health Research Funders (IAMHRF) to generate a global view of funding into mental health research, increasing visibility of the field’s gaps and trends.

“MQ’s UK funding studies were very important. They made it possible to identify and measure total investment in mental health research at a national level for the first time; to understand how and where funds had been invested, and to raise questions about whether funds had been well allocated.

The IAMHRF has now built upon the methodology to provide the first global view of mental health research funding, highlighting global gaps and inequalities.”

Dr Danielle Kemmer, International Alliance of Mental Health Research Funders (IAMHRF)

**RESEARCH HIGHLIGHT:**

**THE COVID RESEARCH PRIORITIES PAPER**

The COVID-19 pandemic shone a spotlight on mental health. MQ directed that light towards advancement of our understanding.

In April 2020, MQ and the Academy of Medical Sciences convened a meeting with experts from around the world to develop a position paper that identified the immediate and long-term priorities for mental health research amidst the COVID pandemic.

The COVID Priorities paper was the most cited paper in The Lancet that year. The paper outlined the main priorities upon which researchers needed to focus:

- **Holistic approach:** the importance of an integrated ‘mind-body-brain’ view of mental health was noted as crucial for both the direct and indirect effects of COVID-19;
- **Focus on solutions:** While a lot of attention was given to describe the extent of mental health problems during the pandemic, the paper emphasised the importance of focusing on solutions;
- **Focus on vulnerable populations:** including the young, old, people who are financially insecure and who have pre-existing mental health conditions;
- **Mobilise data:** to address the need for data to link faster and more effectively to respond to the rapidly changing landscape of the virus, the paper advised promoting open science practices (this is something MQ was experienced at facilitating);
- **Collaborate:** An interdisciplinary approach to research must be built upon, the paper noted, e.g., research needed to engage with social researchers, mental health practitioners and other healthcare staff, people with lived experience and policymakers (something MQ already had a strong track record of doing);
- **Embed responses within a broader mental health context:** It was noted that the mental health impacts are not experienced in isolation. Its consequences are heavily dependent on wider contexts. Herein lay an opportunity to understand these contexts better;
- **Involve people with lived experience:** the paper suggested engagement with those with experience of mental illness needed to be strengthened in all research processes (again, something MQ has championed).

“A real legacy of MQ is that we catalyse action, not only within MQ but also in our wider community. That co-creation is something MQ facilitated and inspired.”

Professor Emily Holmes, MQ founding trustee and lead author of the COVID Research Priorities paper

**THE NEED:**

The pandemic required urgent research so that its impacts were fully understood, but without prioritisation, it was disjointed.

**THE ACTIVITY:**

MQ & the AMS held an expert meeting to identify immediate and long-term priorities for mental health research amidst the pandemic.

**THE OUTCOME:**

The landmark paper, published in the Lancet, outlined the main priorities upon which researchers needed to focus.

**THE IMPACT:**

Researchers were better able to focus resources on finding solutions for those most in need.
Holmes, Founding MQ Professor Emily INTERVIEW Co-Trustee and Research in the The fellows have a legacy beyond the actual studies ca... At the time my colleagues working in heart or lung or cancer research had charities dedicated to their fields. It’s incredible, thinking back, that we didn’t have this in mental health.

One of my fondest memories of my time as a trustee of MQ is the first round of chairing the Fellows Committee, seeing just how phenomenal the applications were. We could have funded hundreds of people. The moment you’re able to give fellowships to people is so very motivating.

Another highlight is being a part of a very exciting multidisciplinary panel, having those discussions and arguing for why these projects could make a difference. Having a committee where people could talk [about mental health research] from different perspectives was a real opportunity to do something so different and not siloed.

The fellows have a legacy beyond the actual studies in their fellowship. Their legacy is challenging the field, asking questions differently, delivering results that shake things up and inspiring other people to start doing the same.

MQ brings out the best in people. Being on the board is a privilege. Working with people from very different backgrounds all pulling together - that’s exactly what Mental Health Science needs.

To serve the people, we need to enable studies focused on creating positive treatments that can make a difference to patients. There haven’t really been treatment innovations since the 1960s. And the reason for that is that it’s so much easier to do things as they have been done. It’s easier to ask questions that already have an answer. MQ asks the hard questions.

MQ is not only creating new, innovative treatments that could make a difference to more people more quickly, but we’re expanding the very notion of what treatment of mental health conditions actually might be.

RESEARCH SHOWCASE: COVID, ANXIETY AND DIGITAL THERAPIES

The COVID-19 Pandemic placed immense pressure on all of us, and young people saw their mental health particularly affected. The 2021 Fellows all focused on young people’s mental health and how we could improve this post-pandemic.

One study in particular looked at the impact the pandemic was having on the mental health and wellbeing of young people long-term. Using the COVID-19 pandemic as a stressor, this study monitored how symptoms of anxiety and depression changed in young people over a period of two years, and examined whether these changes could be used to predict who will go on to experience longer-term issues. It established how symptoms of mental health conditions changed in young people from before the pandemic to during the lockdown years. This research aimed to identify and inform the development of psychological interventions for stress-related mental health in young people, even beyond the specifics of the pandemic, to other chronic stressors such as periods of economic hardship or major health issues. This new treatment development work also drew upon a previous MQ-funded study by Professor Colette Hirsch. Colette’s 2015-2019 study developed an intervention for anxiety and worry (a key risk factor for escalating anxiety).

The intervention was delivered online to increase accessibility since people can complete the intervention where and when they like. The intervention targeted the habit to draw negative conclusions from unclear or ambiguous information (negative interpretations), which is particularly strong in people with anxiety and depression. This accessible, straightforward intervention effectively reduced worry and anxiety in people with severe clinical anxiety problems. “I found the experience really helpful which amazed me. I feel more positive and happier. I would like to say a big thank you to the team and I hope others will be as satisfied as I am.” Participant from Colette Hirsch’s study.

Building on this treatment development approach, Colette has recently co-produced an App with young people who suffer from extreme worry, which is specifically designed for young people aged 16 to 25 and aims to make their worry manageable.

Colette’s online intervention went on to be developed further into an App as part of Deutsche Bank’s Global 24-Hour ‘Transforming Mental Health’ Hackathon.

In 2022-23, MQ was Deutsche Bank’s UK Charity of the Year. As part of this partnership, mental health researchers had the opportunity to work with Bank staff in a 24-hour hackathon, to develop an app to deliver Colette’s LENS intervention.

The annual event challenges employees to develop a technological solution to a given problem in just 24 hours.

In 2022, over 1,300 employees worldwide took part and created the prototype app version of LENS. As a result, MQ and Deutsche Bank won the 2023 Inside Out Award for Best Use of Technology.

THE ACTIVITY: MQ funded Colette Hirsch’s research to develop an evidence-based intervention to lower levels of worry and anxiety.

THE OUTCOME: A new digital app is being developed to ensure wider accessibility as a low intensity intervention. The app will also be adapted to work alongside face-to-face therapies.

THE IMPACT: This research will inform the development of psychological interventions for stress-related mental health in young people.
MQ publishes a policy paper with the All Party Parliamentary Group for a Fit and Healthy Childhood – The COVID Generation: A Mental Health Pandemic in the Making

The first virtual Mental Health Science Meeting is held allowing attendees from around the world to join

MQ invested in the IDEA-Flame project – a continuation of the highly successful IDEA project (read more on page 24)

Secured funding from the Medical Research Council for the DATAMIND project

MQ works with Psychiatry Consortium to launch new discovery fund to accelerate pharmacology industry investment

A week-long virtual mental health science festival is held with 405 attendees from 37 countries (read more on page 16)

The Gone Too Soon workshops are held, bringing together experts virtually to discuss the challenges of premature mortality in mental health (read more on page 51)

In 2022, nearly one billion people worldwide have a mental health condition or mental disorder (WHO 2021)

In the first year of the COVID-19 pandemic (2020-2021), anxiety and depression increased by 25% (WHO 2020)

Governments worldwide spent an average just over 2% of their health budgets on mental health (WHO 2020)

Many low-to-middle-income countries reported having fewer than 1 mental health worker per 100,000 people (WHO 2020)

Research, supported by MQ, found that people who were hospitalised with COVID-19 may experience various long-term problems related to their brain function. These problems can persist or emerge for a long time even after they have recovered from the acute phase of the illness (read more on page 46).

Dr Mark Taylor (Sweden) found that autistic people are at high risk for mental health problems when they are a young adult and is now investigating the specific reasons why

Dr Ruchika Gajwani (UK) is working on improving the detection and diagnosis of young people with borderline personality disorder (BPD)

Dr Katherine Young (UK), who later handed the project over to Dr Colette Hirsh, investigated the impact of the pandemic on young people’s mental health (read more on page 27)

MQ advised the new Healthy Brains Global Initiative (HBGI) on their strategy to invest in research into young people’s anxiety and depression

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The COVID-19 Lancet Commission is launched

MQ’s largest corporate partner – Deutsche Bank, names MQ as its charity of the year for 2022 and 2023

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MQ’s research and publications, alongside our work leading and convening experts at local and international level, have sharpened the focus of Governments, institutions and funders. We continue to put research to work for those affected. We need ‘live’ research that can transform policy and practice on the ground.

These recommendations included more funding for specialist mental health support in schools, more funding for research, better investment in early intervention services and, most importantly, a cross-sector approach to supporting children and young people that involves healthcare providers, local authorities, schools and community groups.

The report was well received and in May, the then Secretary of State for Education announced £17 million in funding for better mental health support in UK schools.

Following this, MQ ran a ‘write to your MP’ campaign. In total 2412 people contacted their MP to demand more funding be given to mental health research.

MQ continued to lobby for early intervention funding along with another member of the APPG,Play Therapy UK. This included meeting with MPs to give them briefings about the importance of early interventions and the long-term economic benefits as well as the humanitarian benefit, of preventing mental illnesses before they even take hold.

These briefings included Lord Davies of Brinton who gave an impassioned speech in the House of Lords using facts from MQ’s briefing document, and Labour MP Kim Leadbeater who later worked with the Fabian Society to develop a white paper of healthcare recommendations which greatly influenced the Labour party’s health strategy.

The following year in 2022, MQ submitted considerable evidence for the government’s mental health strategy planning, including evidence gathered through PPIE (read more on page 9).

When, in January 2023, it was announced that this 10-year plan was being abandoned by the government, MQ again partnered with the APPG for a Fit and Healthy Childhood to produce a new report that not only recommended that the government take a long-term approach to improving mental health, but also what this approach should look like.

This report was delivered to Downing Street along with an open letter, co-signed by 40 experts and leaders in mental health, imploring prime minister Rishi Sunak to reconsider scrapping the 10-year plan.

In August 2023, MQ partnered with Glasgow University to produce a paper on the cost-of-living crisis. This paper made 18 recommendations for different sectors of society to help them take realistic, compassionate steps to help support people’s mental health during a difficult time. This cross-sector approach included recommendations for employers, healthcare providers and the government, as well as individuals.

In September 2023, the MQ and Peopleful report was published, examining the impact of workplaces on mental health, and revealing that in 4 employees are at a high risk of burnout due to work-related stress. The Report found that the main cause of workplace stress was workload, closely followed by poor person-job-role fit.

Also in September, MQ’s CEO Lea Milligan chaired a cross-sector meeting with Collective Voice, Merseyside care and Dame Carol Black, to discuss the unified approach that different organisations can take to drug and alcohol dependent people who are struggling with mental illness.

This multi-agency approach to dealing with mental illness doesn’t just reflect the policy recommendations that MQ endorses, but also MQ’s own approach to research. By bringing different experts to work together, silos are broken down and barriers to progress are removed.

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44 of MQ’s studies have influenced policy or regulations or are being used in practice

Gather the evidence

Make it accessible

Influence policy and practice

Steering the mental health missions

The Office for Life Science has invested £42.7 million for mental health research to develop new treatments, improve diagnosis, and increase use of innovative technology.

The ‘Mental Health Mission’ aims to accelerate research across the UK and attract private investment to potentially benefit millions of people.

Funding will be spread across the UK including two demonstrator sites in Birmingham and Liverpool who will develop novel ways of working which can be rolled out to other sites in the future. This £42.7 million investment into mental health research will be delivered through a National Institute for Health and Care Research (NIHR) network of investigators.

Research in Liverpool will include the development of a mental health avatar - or interactive digital twin – which is a computerised representation of someone’s health and can suggest beneficial new treatment and resources for people to look after their mental health. The avatar will adapt to variations in an individual’s behaviour and lifestyle which aren’t necessarily captured in clinical diagnoses but are key to identifying new treatments and ways to optimise their care, creating an interactive form of health care.

People will also be given the opportunity to take part in ground-breaking trials of new therapies for mood disorders. The research will specifically investigate child mental health to develop wellbeing apps, games and parental support services to help diagnose mental health problems early.

In Birmingham, research will focus on increasing recruitment to new studies to test and validate novel treatments for mental health conditions, including neurostimulation therapies which trigger cells in the brain to improve symptoms of depression, as well as working with people to comprehensively understand treatment resistant depression, for example. There are also plans to train and support a network of researchers and NHS staff to build capacity in the Midlands.

MQ are part of the leadership steering group of the programme, hoping to find alignment between patient and industry priorities, to find new ways to stimulate investment into the UK’s research infrastructure, leading to more trials and ultimately new treatments.
To transform mental health, highly skilled, passionate and talented researchers are needed. However due to decades of underfunding, the mental health research workforce is not as large, nor as diverse, as it should be.

Recognising this, MQ is investing in the future of the research workforce. MQ supports early career researchers with ambitious ideas around the world who aspire to be the next leaders in mental health researchers.

We are addressing the urgent need to increase the number of researchers but also the diversity, ensuring all those we fund and work with are supported at every stage of their project and career.

Without researchers, there is no research. Without research, true change and advancement isn’t possible.

For many years now, MQ has worked with the McPin Foundation and the National Institute for Health and Care Clinical Research Network (NIHR CRN) to present the prestigious annual Mental Health Research Service User and Carer Involvement Awards – recognising the hard work and innovation of mental health researchers who incorporate PPIE into their study design and champion the voices of service users.

Feedback from researchers on MQ’s approach is overwhelmingly positive. Researchers who’ve worked with MQ say we created a positive environment with a supportive and engaging attitude. We don’t just raise awareness of the mental health agenda; researchers say we also celebrate the researchers themselves and in turn raise awareness of their vital work.

The impact of this is that MQ researchers establish meaningful collaborations to strengthen their work and carry those connections with them into future studies.

“MQ publicises projects well. Several people have contacted me about the findings, and I was invited to apply for another grant because of a funder seeing the MQ publicity.”

Professor Louise Condon

MQ is helping researchers grow their careers not only by securing funding but also by creating strong networks. Researchers, when asked what the most significant difference MQ had made to their career or research, said that funding for their research only happened because of MQ. In other words, MQ is the reason their research exists at all. The second most significant change was creating close collaborations.

“Without researchers, there is no research. Without research, true change and advancement isn’t possible.”

MQ- funded projects were instrumental in over 100 researchers obtaining a permanent or long-term position in mental health research.

We supported 31 early career researchers through our flagship MQ Fellows Programme.

90% of researchers went on to permanent or long-term positions following MQ grants.

MQ is committed to growth and learning. Reflection aids progress. This is why we consistently and proactively take steps to address and improve our practices, to nurture refinement of our positive research culture.

- MQ embeds Equality, Diversity and Inclusion into all our processes
- Mentorship and knowledge-sharing
- Streamlined applications for funding
- Enabling PPIE and co-production (read more on page 17)

Investing in a positive research culture where diverse voices are heard, workers feel supported and valued and all stakeholders are committed to continuous improvement. This not only ensures we get the best results from the studies MQ supports, but that the research workforce can grow and thrive.

“The extent to which MQ funding has helped my career development cannot be overstated. The knowledge, expertise, exposure, collaborations, publications, and reputation that I have gained because of MQ’s support contributed to me being recruited to several positions.”

Dr Zach Cohen
“At the Data Science meeting in April 2023, there was a special focus on supporting Early Career Researchers. I had the opportunity to discuss my own work with other researchers and had fantastic discussions. I look forward to the next meeting.”

Dr Emily Ball, Early Career Researcher 2023

“In 2016, I was on maternity leave and simultaneously applying for 4 different fellowships, as I knew I only had a few months left on my contract upon returning from leave. I was fortunate to get through to the final interview stage in all 4 of my applications, but after the interviews I started getting rejections. The feedback was very positive each time, but 3 different funders told me that I had “just missed out”.

At this point, I was considering my options, including leaving academia, as I knew I wouldn’t be able to relocate my family for a research career elsewhere. The final interview was with MQ. I was overjoyed and incredibly relieved to hear I had been successful.

This award came at a crucial time when there were simply no other options available to me. Shortly after my award, I was lucky enough to get a position as Group Lead in mathematics at Queen Mary University of London, then a fellowship at the Alan Turing Institute (the national institute for data science and AI), and finally an Assistant Professor position in Psychiatry at Cambridge. Most recently, I was promoted to a Professorship in Cambridge, all within 5 years of my MQ award.

The MQ grant has enabled me to grow a group of 8 wonderful students working on a range of exciting topics. I really couldn’t ask for more. I have no doubt that none of this would have happened without the very timely support I got from MQ, and without MQ’s very flexible approach to how the support is used.

My work aims to improve our basic understanding of brain development and related disorders, with a particular focus on schizophrenia and depression, which often first manifest in adolescence. My work combines brain imaging together with genomics and aims to improve our understanding of the biological basis of disorders and how it may differ between various subgroups of people. The aim ultimately is to develop new therapeutic approaches. Recent work, for example, has focused on how a person’s sex affects disorders like depression – something which is poorly understood, and which clinical trials have so far often neglected.

The original award was meant to support my own salary for 3 years, at Cambridge. But MQ allowed me to adapt how I use the funding as I switched institutions and started my own lab. The flexibility MQ gave me created a win-win scenario and has, I believe, allowed me to multiply the impact of the funds originally awarded.”

Prof Petra Vértes, Professor Systems and Computational Neuroscience Group, Department of Psychiatry at University of Cambridge
HELPING PEOPLE TO THRIVE IN A POST-PANDEMIC WORLD

Understanding the full impact of COVID-19 on mental health is vital if we are to ensure everyone can recover and thrive post-pandemic.

MQ has supported a number of COVID-related studies including:

**PHOSP**
The Post Hospitalisation with COVID longitudinal study is led by the University of Leicester and is monitoring over 10,000 patients who were hospitalised with COVID to learn more about the long-term effects of infection and hospitalisation on both physical and mental health.

The study found that only 29% of people were fully recovered 12 months after having COVID. 25% of people still experienced significant symptoms of anxiety and depression, and 12% had symptoms of PTSD. People who had been bedridden for over 7 days were more likely to be experiencing depression and anxiety even 16 months later.

**COVID-19 Clinical Neuroscience Study**
This COVID CNS study involved 800 UK patients who were admitted to hospital with COVID-19 and had neurological or neuropsychiatric complications. The researchers used in-depth clinical, laboratory and imaging studies to better understand why and to whom COVID infection caused brain injury. MQ’s contribution towards this study was through the PPIE strategy.

**Lancet Standing commission**
MQ Fellow Dr Ethel Nakimuli-Mpungu (read more on page 11) and chair of MQ’s Science Council, Professor Peter Jones, co-chaired the Lancet Commission with contributions by members representing policy, mental health economics and community workers.

This international, multidisciplinary Commission is reviewing the post-pandemic situation and identifying continued priorities for pandemic-related mental health research. These priorities are set in collaboration with an interdisciplinary expert group of over 25 researchers and Lived Experience Experts.

“**When the pandemic hit in 2020, MQ quickly brought together a group of academics from different clinical specialties. The idea for the Brain Fog project was conceived through rich regular collaborative meetings and supported by MQ who secured the funding.”**

Dr Parisa Mansoori, MQ’s Research Programme Lead, co-author on COVID ‘brain fog’ paper

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RESEARCH HIGHLIGHT:

**BRAIN FOG STUDY**

Approximately 2 million adults in the UK are likely to have lasting symptoms after COVID-19, often called “long-Covid”.

Symptoms include lethargy, chest pain or respiratory difficulties, joint pain, depression and anxiety, and cognitive impairment.

This cognitive impairment, also sometimes called ‘brain fog’, is when thinking is slowed or ‘fuzzy’, there are difficulties with concentration and problems with memory.

This study, conducted by Maxime Taquet from the University of Oxford and supported by MQ and the Wolfson Foundation, produced several crucial findings. The most important being evidence that these problems were caused by blood clots.

“**COVID is associated with elevated risks of a wide range of neurological and psychiatric consequences. The goal is to be able to prevent and reverse the cognitive problems seen in some people after COVID-19. Our MQ-supported study’s results are a significant advance in understanding.”**

Dr Max Taquet

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THE NEED:
3.1% of the UK population are affected by Long-COVID including brain fog.

THE ACTIVITY:
With funding from the Wolfson Foundation, MQ supported the COVID brain-fog study.

THE OUTCOME:
Investigator Max Taquet found brain fog could be caused by blood clots.

THE IMPACT:
This discovery could lead to more effective treatments helping millions.
9 new MQ Fellowships are announced as part of the 'Gone Too Soon' funding programme (read more on page 25)

Dr Amy Ronaldson (UK) is researching why people with severe mental illnesses are more likely to die from infectious disease than people without them.

Professor Gareth Griffith (UK) is working to improve the detection of selection bias in order to improve representativeness in mental health research.

Dr Maria Marracini (USA) is co-designing a virtual reality tool to help adolescents who have been hospitalised for suicide-related crisis.

Dr Marisa Marracini (USA) is working to understanding how youth comorbid mental and physical disorders may affect risks of suicide.

Dr Moritz Herle (UK) is using data science and insights from people with lived experience to understand why people with eating disorders are at increased risk of suicide.

Dr Leslie Johnson (USA) is adapting and testing an existing treatment for people with type 2 diabetes in order to treat patients with type 1 diabetes.

Dr Suhas Ganesh (India) is working to better understand how an individual’s environment, and their genetic make-up, affects treatments for schizophrenia.

Dr Alexandre Lussier (USA/Canada) is running a longitudinal study of gene-environment interactions and epigenetic mechanisms to understand how depressive disorders influence suicide risk.

Senior Research Fellow, Alexandra Buton (UK) is exploring how social prescribing can prevent people with serious mental illnesses from developing cardiovascular diseases.

MQ once again partners with the APPG to produce the paper: The Major Conditions Strategy – A 10-year failure for mental health in response to the UK government’s scrapping of the 10-year strategy (read more on page 40).

The groundbreaking Gone Too Soon Roadmap is published.

MQ is shortlisted for a Business Charity award.

MQ is shortlisted for a Business Charity award.

The solutions-based Cost of Living Report is published.

MQ is shortlisted for a Business Charity award.

MQ advised the UK Office for Life Science on their new Mental Health Mission, a government investment of £40.2 million for research into mental health.

MQ is shortlisted for a Business Charity award.

The MQ and Deutsche Bank Hackathon wins 2023 Inside Out award (read more on page 37).

MQ is shortlisted for a Business Charity award.

MQ wins a Prestige award.

MQ wins a Prestige award.

MQ wins a Prestige award.

MQ co-Chairs the Office for Health Improvement and Disparities Expert Reference Group on addiction and mental health.

MQ wins a Prestige award.

MQ wins a Prestige award.

MQ wins the Charity Governance award for its pandemic response.

“Research is for everyone. All of us benefit from research. Research is the demonstration that, as a society, we are optimistic that our world can change for the better in the future.”

Dr Massimiliano Ori, MQ 2023 Fellow
People with severe mental illnesses die up to 10 years earlier than the general population. Their lives are scandalously cut short due to the tragedy of suicide as well as a disproportionately high rate of physical health problems with low detection. To address this, MQ held an expert meeting which led to the ‘Gone Too Soon’ thematic focus.

In February and March 2022, two expert meetings were held virtually, led by Professors Carol Worthman from Emory College in the USA and Professor Rory O’Connor, director of the Suicide research lab at the University of Glasgow.

These meetings convened world-leading experts from many disciplines, including lived experience experts, to develop a roadmap for tackling premature deaths connected with mental illness and suicide.

These meetings and subsequent report were held in partnership with the William Templeton Foundation for Young People’s Mental Health.

In 2023, a landmark paper published in the Lancet Psychiatry called for action on a global scale to put an end to the growing mortality rates of people with mental illness and distress.

The paper, written by 40 global experts, followed an extensive road mapping process of evidence reviews and consultation with mental health researchers, clinicians, policy experts and people with lived and living experience of mental illnesses and suicide. This important paper was named ‘Gone Too Soon’.

The group mapped the range of factors which increase the risk of early mortality for people who are suffering from mental health conditions and made 18 evidence-based recommendations for policy makers, business leaders and health workers world over.

The theme of the 2023 MQ Fellows was also aligned with this thematic focus, as all nine are investigating the links between physical and mental health or preventing suicide and other mental health-related premature mortality.
James Downs, MQ Ambassador

James Downs, MQ ambassador, shares his experience of being involved in the Gone Too Soon paper.

“I have had experience of serious mental illness (SMI) for the last 20 years. I have a long-standing eating disorder with one of the highest rates of mortality, other co-occurring conditions, physical disability, and a psychological disability.

I heard about Gone Too Soon through MQ. Immediately, it piqued my interest. When I found out people with mental illness die too young, I thought “this is going to be me” which is a horrible, sad and very bleak realisation. Many of my friends have died from SMI and related conditions. This makes it even more important I am involved in research. Rather than be engulfed in fear or despair, I can do something constructive by using my experience to change things.

Knowing MQ was involved in the Gone Too Soon paper gave me confidence it would be a meaningful process and not just a “tick box exercise” or tokenistic.

While there’s a lot of talk about the ‘shallow end’ of the pool of mental health conditions and related solutions, there isn’t much about SMI and the realities of that. Something like people dying too early is not going to be fixed by self-care or mindfulness or colouring books. This is a tragedy that is happening day after day.

Once I was involved in the project, the process was extremely clear, which is not always the case. I’ve done a lot of work in mental health research and co-production. Often people with lived experience are brought in quite late when a lot of things have already been decided. People running projects might find it useful to say they’ve included people with lived experience in evaluations when people like me should be involved in the running of the project.

In the Gone Too Soon project, I was involved from the get-go in an equal way. What I had to say was valued. The researchers weren’t just going through the motions to get the project off the shelf. Instead, they were truly interested in working with people with lived experience. The project was reciprocal, not transactional.

I often write myself off. I don’t have imposter syndrome but only because you can’t be an imposter when you’re always an outsider. In this project, I wasn’t an outsider. I was valued within.

There are so many different areas involved in the paper, not just why people die too early, but public health, clinical practice and differences around the world. I was involved in everything from how the study was designed to who was involved, how the groups would run, what we’d do with the data, writing, editing, formatting, creating graphics. I was particularly involved in the implementation cycle and lived experience involvement, how people with lived experience might read this research and how they are represented.

While it was difficult to confront what I’ve been through, that its impact on my health could’ve been preventable and to consider friends who have died too soon, it was also very hopeful and inspiring. Things can be different. It just requires a lot of will, effort and resources.

It gives me hope that MQ can pioneer more research across mental health, and lived experience will always be at the heart of that.”

The whole team were committed to the value of expertise by experience and the knowledge gained through experience alongside knowledge gained through academia.

The transformation social media has had on society, communication and our mental health, even in MQ’s lifespan, has been astounding. And whilst further scrutiny is needed to measure the potential impacts on young and other vulnerable people, these new digital platforms have opened a world of opportunity for researchers.

The dissemination of new research, whilst once reserved for journals and hit-or-miss press releases for the media, can now have their findings shared widely on social media. Infographics highlighting the key points, videos explaining the process and findings and even interviews with the principal investigators are all now quick and easy to produce and share.

MQ has been at the forefront of this work to make research accessible to everyone.

The MQ YouTube series, Many Questions, provides a more intimate view of the work and motivations of researchers as well as highlighting the many unanswered questions we have yet to address.

Funding opportunities and calls for applications are now shared through MQ’s Research Roundup newsletter which is published quarterly and distributed to over 3000 mental health researchers globally.

GALENOS, a project with The University of Oxford, Wellcome and many other organisations, is making it easier for everyone, including patients, funders and researchers, to access and review the scientific literature that is currently available about anxiety, depression and psychosis. This is through a brand-new living systematic review.

Finally, in 2023 MQ published its first book, in partnership with Enigma Wellness. This book uses real people’s lived experience as a frame for explaining what different mental health conditions are, how it feels to have them and what we know about them.

All these efforts help to engage more people in why research matters.
What MQ has done in the last 10 years:

**Developed Mental Health Science:** MQ has championed development of the umbrella discipline of mental health science and pioneered the use of data science for mental health, as well as to Wellcome, one of MQ’s seed funders, provided important proof of concept for strategic funding of MH science (read more on page 10).

**Revolutionised research:** MQ brought together diverse specialists together for the first time and drove innovations that changed how research is done. MQ provided a platform for interdisciplinary and international infrastructure, collaboration and infrastructure. MQ continues to create new tools and methods to deliver breakthroughs in mental health (read more on page 15).

**Invested in Impact:** MQ continues to illuminate critical underfunding of mental health research and facilitates more inclusive and cost-effective research while building essential funding for mental health research. MQ’s interest in impact comes across consistently to researchers, and it has driven action towards impact, as well as a sense of care.

**Took/Taken successful risks:** MQ continues to invest in early career scientists with high-risk/high-reward ideas and invested in successful projects which would otherwise struggle to obtain funding. MQ’s funding has so far supported new research to achieve proof of concept and transition to scale, and to secure additional funding to achieve final patient impact. MQ’s belief is in risk equals reward, trusting in the scientific process and remaining secure in the knowledge that all learning is valuable.

**Grown talent:** MQ’s funding helps to cement researchers in their careers, building teams and longer-term research, as well as leading to international recognition in the mental health research field. MQ provides access to researchers to valued mentors who contributed to the study. MQ has built a solid reputation in the academic community, with MQ grants leading to career advances for researchers and an increase in the number of collaborations (read more on page 42).

**Addressed inequalities:** MQ has steered resources towards gaps in mental health research and challenged inequality in mental health by investing in projects which involve low-and medium-income countries, projects that focus on young people, and on preventing mental health conditions from developing (read more on page 25).

**Engaged people:** MQ has championed the involvement of people, patients and the public in research and championed the voices of lived experience experts. The international, multidisciplinary network of experts and researchers worldwide is reflected in the diversity of MQ’s Science Council and in the cross-collaboration of MQ’s studies. MQ also makes research accessible through its dissemination and comms work. For example, through our content, book and the Open Mind Podcast (read more on page 53).

**Focused on solutions:** MQ continues to seek answers to problems and challenged researchers to propose solutions. MQ invested in studies that challenge current practice, investing in studies that have revolutionised how groups and situations are understood and managed (read more on page 53).

72% of MQ’s researchers believed their work could result in improving people’s lives. (31)

23% said that their outputs were being used in practice in some way, and 63% believed their work had increased public awareness or understanding of the condition.

The most common outputs of work were:

- Database/dataset (69%);
- Data analysis technique/data handling and control (46%);
- A change in understanding of a condition (40%).

One thing is for sure. Without research, it’s just guesswork as to what the answers to these challenges are.
THANK YOU

Thank you to all our supporters who have helped us to make huge strides in mental health over the last 10 years. We hope that you will continue to support vital mental health research over the next 10 years.

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MQ Mental Health Research are shaping the future of mental health.

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Together, we can shape a mentally healthier future for all.