



Upheaval, uncertainty, and change: themes of adulthood *A study of four life transitions and their impact on our mental health*

Methodology

Overview

The aim of this report was to explore a selection of life transitions in adulthood which can influence mental health and suggest actions for how we can better promote and protect good mental health in the context of these life experiences.

We set out to answer four key research questions:

1. What are some key life events in working-age adulthood which are relevant to mental health?
2. How does the experience of these life events relate to mental health?
3. What interventions currently exist to promote and protect mental health during these life events? Where are there avenues for new preventative approaches?
4. How does the experience of these vary across socio-demographic groups? Where there are inequalities, how can they be addressed?

We used a mixed method approach to answer these questions, utilising:

- **Consultation:** To identify key life events relevant to mental health, we reached out to the public via a survey circulated on our social media channels and discussed the results with our Lived Experience Advisory group (a group of 12 adults with a diverse range of life experiences). Our Lived Experience Advisory group provided feedback throughout the project, including reviewing our emerging findings, and informing our final recommendations.
- **Qualitative Analysis:** To learn more about how the experience of each life event relates to mental health, we worked with voluntary sector organisations (The Motherhood Group, Pregnancy Sickness Support, Citizens Advice Wandsworth and Cruse Bereavement Care) to recruit to four online focus groups (one for each topic) exploring the lived experience of each life transition, the feelings and emotions that accompany it, and what support people found helpful. We used thematic analysis to identify key themes from each of the focus group discussions.
- **Evidence Synthesis:** To understand what interventions exist to promote and protect mental health during these life events, we worked with Cochrane Common Mental Disorders to develop a rapid review protocol to identify relevant systematic reviews of universal and targeted interventions in each of our four topic areas. We then used narrative synthesis to summarise the evidence.
- **UK National Polling:** To put our qualitative and evidence synthesis findings into context, and to investigate socio-demographic inequalities across our four topics, we conducted nationally representative polling via the organisation Deltapoll and summarised the findings descriptively.

Methodology Details

Consultation

Distribution of an online survey on key life transitions

We drafted an 11-item survey which asked about:

- demographics (age, gender, ethnicity)
- at what age 'working-age adulthood' begins and ends
- alternative descriptive terms for 'working age adulthood' (free-text field)
- what life events people are likely to experience in 'working age adulthood' which affect mental health (free-text field)

The survey was circulated on Mental Health Foundation social media channels (Twitter and LinkedIn) in July 2020, with responses collected over a ten-day period from adults who self-reported as being aged 18+ and resident in the UK.

A total of 406 responses were received.

Responses were independently coded into themes by two members of the research team who discussed and finalised the categorisation of responses. The most frequently suggested themes were brought to a lived experience advisory group for further discussion.

Assembly of a Lived Experience Advisory group, and an initial workshop on topics

A panel of individuals with a broad range of life experiences was assembled through recommendations from staff across the Mental Health Foundation.

The group was composed of 12 adults ranging in age, lived and professional experience, and geographic location. On the panel, three members were based in Wales, three members in Scotland, one in Northern Ireland, and four in England (South West, London, South East, and Midlands).

An online workshop was held to discuss the shortlisted topics from the survey, considering both the degree to which each was universally experienced, and the degree of public awareness of its importance to mental health.

Final selection of topics

The research team reviewed the workshop discussion and selected four topics, considering the following:

- a. universality of the experience, and public awareness of its importance to mental health (informed by the workshop discussion)
- b. degree of engagement and thoughtful conversation topics sparked in the workshop.
- c. spread of topics across different domains (e.g. family/relationship, workplace, finances)
- d. fit with the overall priorities and strategy of the Foundation.

The final four topics were then shared back with the Lived Experience Advisory Group, who provided their thoughts and feedback, helping us to further refine our focus within each topic area.

Qualitative Analysis

Recruitment of focus group participants

We worked together with four different voluntary sector organisations supporting people within our topic areas. This allowed us to reach individuals with direct lived experience of the topic at hand. Organisations were identified either through existing Mental Health Foundation contacts, or through a response to a request for collaboration circulated via Mental Health Foundation social media channels (Twitter and LinkedIn) in August 2020.

Each partner organisation was asked to recruit between six and 12 adults to attend an online focus group. The recruitment method varied between organisations, from contacting service-users directly to gauge their interest, to circulating recruitment material via supporter and beneficiary networks.

Interested parties were directed to the research team at the Mental Health Foundation who provided further information about the project and collected informed consent.

Data Collection

Focus groups were held on Zoom and lasted for 90 minutes. Each focus group was facilitated by two members of the research team, with a third member of the team moderating the chat function within Zoom.

As each group involved the discussion of potentially challenging or distressing topics, a representative from each partner organisation was on-hand to observe and provide support or signposting where needed. Signposting resources were provided both in, and directly following each focus group, and the focus group discussion guides were reviewed by a Mental Health Foundation safeguarding officer prior to use.

Each focus group followed a discussion guide composed of several open-ended questions and associated prompts. Questions broadly followed the structure below:

- When you think about [life event] what first comes to mind?
- Can you tell us about a specific time where you experienced [life event]?
- What things made the experience easier, or harder for you?

Groups were recorded and transcribed for analysis.

Analysis

Each transcript was independently reviewed and coded by two members of the research team, who used thematic analysis to identify themes. Following an initial round of coding, the team met to compare, review, and refine the final themes which are presented and described in the main report.

Evidence Synthesis

We worked in partnership with Cochrane Common Mental Disorders to develop a rapid review protocol to identify and synthesise evidence for universal and targeted interventions for mental health in the each of our four topic areas.

The rapid review took a pragmatic approach, focusing on peer-reviewed systematic reviews and meta-analyses, and prioritising findings that are recent (published 2005 or later) and applicable to a UK context.

The full rapid review protocol was pre-registered on PROSPERO.

Search Strategy and Screening

Search terms related to mental health and each of the key life experiences were run in MEDLINE, PsychInfo, and Cochrane Library databases, with subsequent hand-searching and forward citation searches of relevant publications.

Five members of the research team acted as independent reviewers. All abstracts and full texts were screened in duplicate. All conflicts were resolved through discussion or through consultation with a third reviewer where required.

Inclusion Criteria

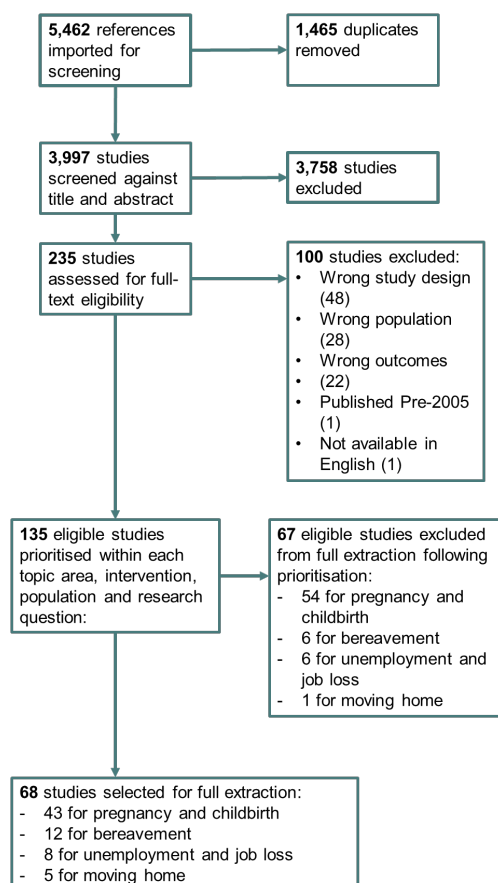
- Working age adults (aged 18-64)
- Exposure to of one or more of the four key life transitions (pregnancy and childbirth, job loss or unemployment, moving home, bereavement)
- Intervention aimed at mental health promotion or the prevention of the development of mental health problems. Universal and targeted approaches were eligible for inclusion.
- Systematic reviews and systematic reviews with meta-analyses of quantitative or qualitative studies

Extraction and Synthesis

The initial search identified a large number of eligible studies, particularly for the pregnancy and childbirth topic. As the search focused on systematic reviews, reviews addressing similar research questions in the same population were likely to include the same primary studies. Given this, a decision was made to prioritise extraction of one review within each combination of: topic area, research question, intervention, and population. The review selected for extraction was the most recent (by year of publication) and/or an available Cochrane review.

Following this prioritisation exercise, the following information was extracted from each paper: review aims, publication date, type of systematic review, review eligibility criteria, number of included studies, setting of included studies, participant characteristics (age, gender, ethnicity), life transition, intervention characteristics, target population, mode of delivery, mental health outcomes, secondary outcomes, study conclusions.

Extracted data was used to produce a narrative synthesis of results. In the main report, to present



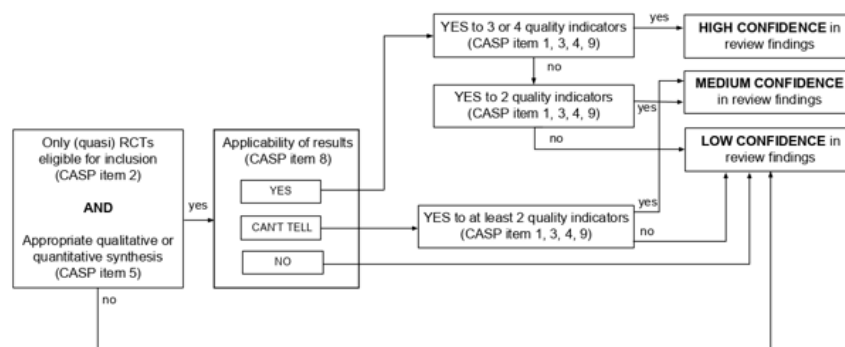
information most relevant to a public and policymaker audience, synthesis was limited to top-level findings categorised by life event and type of intervention.

A more detailed narrative synthesis which includes presentation of quantitative outcome data in tables will be written up for publication in a peer-reviewed journal at a later date.

Quality Assessment

Three reviewers were involved in risk of bias assessments. Each review was assessed by one reviewer and checked by a second, with disagreements solved through discussion.

The Critical Appraisal Skills Programme (CASP) checklist for systematic reviews was used to critically appraise included reviews. Items from the quality assessment were then used to assign a level of confidence in the research findings, based on the process below:



The assessment of confidence was used to inform the narrative synthesis, with areas of low confidence flagged as avenues for further research. Narrative synthesis was conducted by reviewing the selected papers within each topic area and summarising their intervention type, population type, approach to prevention (that is, universal or targeted) and key findings and limitations.

Nationally Representative Survey

Question Selection

Questions were informed by the emerging themes from the focus group discussions. They focused on public perceptions of the influence of each life transition on mental health, emotions associated with each life transition, and the type and perception of support received during the experience of each transition.

Questions were drafted by a senior member of the research team, then reviewed by the Head of Research, the project’s Lived Experience Advisory Group, and an internal project working group.

Polling

Polling provider Deltapoll, a member of the British Polling Council, was selected to undertake the nationally representative polling for the project.

Polling was carried out as part of an omnibus survey and reached a total sample size of 3,879 adults. Fieldwork was undertaken online between November 20th and November 27th 2020. Figures were weighted and are representative of all UK adults aged 18-64.