

**SESSION H2**

**H2.1 Researching sensitive topics: The value of patient and public involvement and engagement when designing social media recruitment strategies**

[Dr Amy Hancock<sup>1</sup>](#), [Dr Christine Heales<sup>1</sup>](#), [Fay Manning<sup>1</sup>](#)

<sup>1</sup>University Of Exeter, Exeter, United Kingdom

**Background** Patient and public involvement and engagement (PPIE) is essential across healthcare research (Gordon et al., 2018). A PPIE strategy was developed to support the 'Larger Bodies in Radiography' project. This abstract reflects upon the value of this strategy for the Social Media (SoMe) recruitment of participants to an online survey.

**Method** Due to the sensitivities around weight/size stigma and negativities often associated with SoMe (Waseem and Kumar, 2017), it was imperative our recruitment was respectful and free from any conscious or unconscious bias. PPIE feedback was received via multiple channels and influenced our entire approach to recruitment.

**Results** Modifications were made based on PPIE feedback. Consultation on terminology and refinement of the wording of posts/reposts led to the phrase 'larger body' being used, alongside our SoMe messaging emphasising that body weight information was not requested. Whilst recruiting for those with 'larger bodies' we realised there was a discrete sub-population within this of those who regarded themselves 'taller than average'. Our PPIE advisers encouraged us to reach out to SoMe special interest groups relating to sub-populations, which had a significant impact upon recruitment.

**Discussion** Challenges arose in framing recruitment appropriately, with difficulty arising with messaging due to the potential for triggering internalised/externalised weight stigma. Recruiting 'tall people' felt more straight forward. PPIE played a pivotal role in adapting, recommending, and approving recruitment messaging. PPIE was essential in ensuring our SoMe strategy reached our target-group in a respectful way, without making assumptions about who that population might be.

References

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2. Waseem A, and Kumar R. (2017) A study on positive and negative effects of social media on society. *International journal of computer sciences and engineering*. 5(10):351-354.

**H2.2 Heightened perspectives - exploring radiographic experiences and attitudes among taller individuals**

[Poppy Ulett<sup>1</sup>](#), [Dr Christine Heales<sup>1</sup>](#), [Fay Manning<sup>1</sup>](#), [Dr Amy Hancock<sup>1</sup>](#)

<sup>1</sup>University Of Exeter, Exeter, United Kingdom

**Background** As part of a larger project on the experiences of people with larger bodies of UK radiography services (both medical imaging and radiotherapy), this study focuses on those who self-describe as 'taller than average', a distinct population whose size is beyond their control.

**Method** An online survey, comprising closed and open-ended questions, was conducted via snowball sampling on social media over two months. Participants needed patient experience of UK radiography, to be >18, and identify as having a larger body. Data analysis used descriptive statistics and thematic analysis. Institutional ethical approval was obtained.

**Results** Out of 91 survey participants, 30 (32.9%) self-identified as taller (over 5 feet 10 inches), with 18 (60%) being female and 12 (40%) male. Quantitative findings reveal challenges related to the availability of suitably sized equipment, such as gowns and wheelchairs.

Qualitative data highlighted patient distress and discomfort during examinations; "I spent the 1.5hr long scan cold from my legs sticking out." Contortionist themes "try to make myself smaller" and systemic neglect of tall individuals in healthcare emerged, "there is no shortening diet or exercise". Staff attitudes greatly impacted patient experience, with instances of ridicule during height measurements leading to feelings of alienation.

**Conclusion** Results show that increasing awareness of tall individuals' mental distress during radiographic examinations could enhance healthcare experiences and reduce avoidance. While equipment improvements require time, short-term solutions like multi-sized gowns can address the misconception of "one-size-fits-all." Staff education is crucial for improved patient care and optimising radiation dose for taller individuals.

## **H2.3 Current radiographers' experiences of inclusive pregnancy checks: LGBTQI+ equalise member perspectives**

[Kyle Cox<sup>1</sup>](#)

<sup>1</sup>AECC University College, Bournemouth, United Kingdom

**Background:** Inclusive pregnancy checks have been a topical issue in Radiography practice for both therapeutic and diagnostic radiographers over the last few years, with significant discourse around how best to approach this conversation and make it a positive experience for a wide range of patients, including those who identify as LGBTQI+. After the release of guidance from the SCoR in 2021 which provided useful resources and advice on how to approach these conversations, it is important to consider the current landscape of inclusive pregnancy checks and consider what is happening currently in radiography practice.

**Purpose:** Perspectives, feelings and real world experiences from members of the SCoR LGBTQI+ Equalise Workers Group will be used to illustrate the successes of the inclusive pregnancy checks but also some of the challenges that LGBTQI+ identifying radiographers can experience within departments themselves. These experiences will be used to highlight key areas for further development for the radiography workforce around implementation of the inclusive pregnancy checks, as well as showcasing examples of good practice and what can be learnt from these examples. This session will encourage reflection on professionals own practice and what can be done to successfully implement these checks and also work as an ally to LGBTQI+ workers in radiography.

**Summary of Content:** Reflective session looking at current LGBTQI+ workers experiences of inclusive pregnancy checks, considering the attitudes and experiences of radiographers within clinical practice and recommendations for best practice moving forward for the benefit of radiographers and patients.

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## **H2.4 The creation and evaluation of a poster designed to improve radiographer communication with patients with Down's Syndrome**

[Miss Edith \(Frankie\) Marwick<sup>1</sup>, Dr Stuart Mackay<sup>2</sup>](#)

<sup>1</sup>University Of Liverpool, Liverpool, United Kingdom, <sup>2</sup>University of Liverpool, Liverpool, United Kingdom

Minimal research has been undertaken into how radiographers communicate with Down's Syndrome patients and attend to their needs. There has been minimal content on this subject in diagnostic radiography degrees, leading to a lack of confidence in talking to Down's Syndrome patients and has led to suboptimal imaging of Down's Syndrome patients. This study aimed to analyse the impact of a guidance poster designed to educate and improve the confidence of diagnostic radiography students when communicating with Down's Syndrome patients.

The guidance poster was designed and presented to University of Liverpool MSc and BSc degree students, providing strategies for communicating with Down's Syndrome patients. A bespoke questionnaire was designed containing 19 questions exploring various aspects of the communication strategies in the poster to assess its effectiveness in improving the students communication skills with Down's Syndrome patients. Ethical approval was obtained from the University ethics committee.

There was no statistical significance seen between the study year and the strategy selected as most useful . 38% of participants selected Direct Patient Communication as the most useful strategy with  $p=0.117$ . There was no statistical significance seen between improvement in confidence and the study year. 98% of students improved their confidence with  $p=0.668$ .

Direct Patient Communication was the most useful strategy. Only 2% of participants did not improve their confidence in speaking to Down's Syndrome patients afterwards. There is potential for this study to be developed further in the future to include other university students, qualified radiographers and then to disseminate it more widely.

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## **H2.5 An investigation into the training provided to diagnostic radiography students on the Inclusive Pregnancy Screening guidance implemented in 2021**

[Ms Eloise Kitson-Dodsworth<sup>1</sup>, Mr Anthony Manning-Stanley<sup>1</sup>](#)

<sup>1</sup>University Of Liverpool, Liverpool, United Kingdom

**Background:** The aim of this study was to identify whether sufficient training is being provided to diagnostic radiography students to allow them to perform inclusive pregnancy checks (IPS), as recommended by The Society of Radiographers, confidently and consistently. Limited access to gender-affirming care contributes to mortality rates and health inequalities among transgender, non-binary, and intersex (TNBI) individuals due to a fear of stigmatization and a lack of awareness from practitioners. After a search of several databases, no research was discovered on how undergraduate

diagnostic radiography students are trained for inclusive interactions despite the value of undergraduate education in shaping students' practices and attitudes.

**Method:** A bespoke questionnaire was emailed out to five cohorts of diagnostic radiography students. The questionnaire covered demographics, knowledge, and confidence levels in incorporating inclusivity into clinical practice and academic studies.

**Results:** Inconsistencies were revealed in exposure to inclusive pregnancy screening, many lacked the background knowledge of inclusivity required to confidently and sensitively perform IPS checks. Clinical practice appeared to enhance confidence levels, whilst the universities impact appeared to be minimal. Further factors that decreased confidence included patient reactions and a lack of understanding for the reasons why inclusive practice is used.

**Conclusion:** While students seemed open and willing towards inclusive practice, there are gaps in training. Particularly regarding male and paediatric patients and understanding inclusive terminology. By closing these gaps through further education and training, universities and placement sites can encourage gender-affirming care and equip students with the necessary skills to promote inclusive healthcare.

#### References

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## H2.6 Literature review - is there a clinical need for British Sign Language in Radiography?

**Saraaz Khalil<sup>1</sup>**

<sup>1</sup>University Of Derby, 15 Surrey Street, United Kingdom

**Background** – The Royal National Institute for the Deaf (RNID) estimated that adult hearing loss will hit 14.2 million by 2035, with one in five service users diagnosed as deaf or hard of hearing (1). O’Riordan (2024) proposed that the UK would benefit from British Sign Language(BSL) education to support the rising deaf and neurodivergent population, with existing radiographers and students lacking competence surrounding BSL(3). Existing literature bases have shown limited data and discussion around BSL application in radiography. This review aimed to investigate the clinical benefits of British Sign Language in Diagnostic Imaging(2).

**Method** – A literature search was conducted using Science Direct and PubMed with the search terms “BSL,” “X-Ray,” “Makaton,” and “Deaf.” A critical appraisal with CASP was undertaken to evaluate the current clinical use of British Sign Language through existing studies on deaf patient experiences in radiology. Inclusion criteria will include journal literature published after 2013 in the United Kingdom with References and data related to the NHS.

**Results-** Data was successfully extracted from 38 papers as a result of a CASP-guided critical appraisal. Findings indicated a poor awareness of BSL across diagnostic imaging, with Radiographers unable to Sign “Hello, my name is”. More work is required to strengthen the active awareness of BSL integration by radiographers.

**Conclusion** – British Sign Language integration displays promising accessibility advancements for the deaf and neurodivergent population with diagnostic imaging. However, greater evidence is required to assess the impact and application of BSL in diagnostic imaging.

#### References

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