




Trinity School of Medicine



Trinity College Dublin  
Coláiste na Tríonóide, Baile Átha Cliath  
The University of Dublin

# HEALTH POLICY AND CIVIC ENGAGEMENT REPORT 2026





As a civically engaged university, Trinity actively strives to fulfil its social responsibilities by advancing knowledge for the public good.

We not only prepare our students and support our staff in becoming active members of society, but also leverage our expertise and resources to address challenges and deliver societal benefits.

**Professor Linda Doyle,**  
Provost and President of Trinity College Dublin

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## CREATING A DIFFERENCE IN THE LIVES OF PATIENTS AND COMMUNITIES THROUGH FIVE STRATEGIC PILLARS:

ADVANCING HEALTH  
EQUITY, CREATIVE  
ENGAGEMENT, PLANETARY  
HEALTH, EVIDENCE-BASED  
POLICY, AND SOCIALLY  
RESPONSIBLE EDUCATION



## Foreword

Civic engagement is vital to Trinity College Dublin's Strategic Plan 2020–2025, Thrive, which envisions a university that challenges and serves society through knowledge and discovery.

In 2022, Professor Jo-Hanna Ivers was appointed as Trinity's first Associate Dean of Civic Engagement for Societal Impact, subsequently publishing the CESI Action Plan 2024-2026 to celebrate and support these efforts across the university. As Director of Policy and Engagement, Professor Susan Smith is dedicated to integrating societal engagement into core medical activities, believing in its transformative power for students, faculty, and external partners.

This 2026 Health Policy and Civic Engagement Report showcases activities across the 21 Disciplines within the School of Medicine, celebrating the achievements of engagement champions. By fostering collective expertise, we generate innovative solutions with real societal impact.

Building upon the 2024 inaugural publication, this report highlights a significant expansion in engagement activity. The stories capture how the School of Medicine makes a tangible difference in the lives of patients and communities through five strategic pillars: Advancing Health Equity, Creative Engagement,

Planetary Health, Evidence-Based Policy, and Socially Responsible Education.

By celebrating these contributions to local and international communities, we reflect on the dedication of our staff, students, and external stakeholders in driving meaningful personal and population change.



**Professor  
Susan Smith**

Director of  
Health Policy and  
Engagement,  
School of Medicine



**Professor  
Jo-Hanna Ivers**

Associate Dean of  
Civic Engagement for  
Societal Impact



# Pillar 1: Advancing Health Equity and Inclusion

*“The enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition.”*

(World Health Organisation (WHO) 2024)

# Inclusion Health: An Education Framework for Healthcare Professionals

## Trinity Academic(s):

Prof Clíona Ní Cheallaigh, Associate Professor Consultant, Clinical Medicine, Trinity College Dublin

## Civic/Academic Partner(s):

Dr Tara McGinty; Royal College of Physicians of Ireland (RCPI), Institute of Medicine; HSE National Doctors Training and Planning (HSE-NDTP); and community organisations including Safetynet Primary Care, Deep End Ireland, UISCE, MASI (Movement of Asylum Seekers in Ireland), AkiDWA, Depaul, EPIC (Empowering People in Care), and TENI (Transgender Equality Network Ireland).

**The Aim:** This initiative seeks to provide a postgraduate medical education resource that translates Inclusion Health principles into practical, clinically relevant guidance. By defining the specific knowledge, skills, and attitudes required for inclusive care, the framework aims to support informed decision-making, effective communication, and continuity of care for populations experiencing social exclusion. It emphasizes delivering clinical excellence that is responsive to social vulnerability and marginalisation.



**The Activity:** The framework was developed through a rigorous co-design process involving service users, peer advocates, clinicians, and community professionals. This collaborative approach included semi-structured interviews (February–March 2025) and workshops (March–May 2025) to identify priority learning needs and opportunities for improving patient safety based on real-world clinical encounters. Insights were synthesised using reflexive thematic analysis to translate lived experiences into practical educational content. The resulting framework is structured into three units:

- **Unit One:** Interpersonal professional skills (building trust and trauma-informed communication).
- **Unit Two:** Clinical skills (inclusive approaches to history taking, diagnosis, and prescribing).
- **Unit Three:** Specific scenarios (high-risk contexts like injecting-related complications or migration-linked presentations).

**The Beneficiaries:** The primary organisational beneficiaries are postgraduate medical trainees, consultants, clinical supervisors, and medical educators. The ultimate beneficiaries are individuals affected by social exclusion—such as those experiencing homelessness, addiction, or forced migration—who often face significant barriers to care and poorer health outcomes.

**Immediate Outputs:** The central output is the Inclusion Health Education Framework (2026), a comprehensive PDF resource designed for postgraduate medical training. The resource provides practical guidance on key themes such as health literacy, diagnostic awareness, and managing complex clinical scenarios.

**Societal Impact and Policy Influence:** This work addresses profound health inequities by recognizing how social context directly shapes clinical outcomes. By embedding inclusion into medical training, the framework:

- **Improves Patient Safety:** Supports doctors in delivering person-centred care that reduces avoidable harm for marginalised groups.
- **Strengthens Trust:** Encourages clinical decision-making that fosters psychological safety and reliability in the patient-doctor relationship.
- **Promotes Clinical Excellence:** Combines traditional standards of good practice with a deep understanding of the social determinants of health.

**Follow up plans:** The framework is intended for ongoing use in clinical learning and reflection, informing tutorials, simulation training, and workplace-based learning. It serves as a tool for clinical supervisors to mentor trainees in complex encounters and for educational design to help healthcare organisations embed equitable, person-centred practices within their training and service delivery models.

## Inclusive Transport in the AI Era

### Trinity Academic(s):

Dr Cuisle Forde, Associate Professor, School of Medicine, Dr Tadhg Stapleton, Associate Professor, Occupational Therapy, School of Medicine, Dr Brian Caufield, Professor in Transportation in the Department of Civil, Structural and Environmental Engineering, Dr Brian Barry, Associate Professor in the School of Law, Dr Mélanie Bourroche, Assistant Professor, School of Computer Science, Dr Lorraine Leeson, Professor in Deaf Studies at the Centre for Deaf Studies and Associate Vice Provost of Equality Diversity and Inclusion.

### Civic Partner(s):

Irish Wheelchair Association, the WayFinding Centre, Vision Ireland, National Office for Traffic Medicine, Centre for Excellence in Universal Design, National Disability Authority, Department of Transport.

**The Aim:** The aim of this initiative is to address the critical intersection of health and transport, focusing on how emerging Artificial Intelligence (AI) can be harnessed to serve, rather than exclude, vulnerable populations. While fostering a trans-disciplinary community of enquiry, this project seeks to embed research directly within the community. An important objective of

the action is to direct four PhD students towards research themes, topics and routes of enquiry that address the needs of those at risk of vulnerability.

**The Beneficiaries:** The WayFinding Centre, the Department of Transport, the Irish wheelchair association, Disabled Drivers Association of Ireland and the National Disability Authority and the National Office for Travel Medicine among others.

**The Activity:** This initiative addresses the critical intersection of health and transport for vulnerable populations, specifically focusing on older adults and persons with disabilities. Recognising the potential for emerging technologies to either bridge or widen societal gaps, the project established a transdisciplinary community of enquiry to help ensure future transport systems are designed with universal access in mind.

In July 2025, a landmark workshop brought together 30 stakeholders, including representatives from the Irish Wheelchair Association, Vision Ireland, and the Department of Transport, to share lived experiences of the Irish transport system. This collaborative approach embeds research directly within the community, fostering social responsibility.

The session was designed to collect qualitative data on the lived experiences of these groups within the Irish transport system. A key secondary aim was to gather data on the process of involving vulnerable populations in transdisciplinary research to establish best-practice methodologies for future civic engagement

**Immediate Outputs:** Immediate outputs included a report which was circulated to all those in attendance. Additional tangible outputs include a paper (currently in preparation) on the qualitative findings gathered as well as a methodology paper on the process on engaging those at risk of disabilities in transdisciplinary research. The import of such a methods paper is to encourage others to include those at risk of vulnerability and outline methods to do this. For example, our event included deaf and visually impaired participants as well as power wheelchair users. The logistics in organising an event to enable participation from such individuals was considerable and we wish to share our learnings such that others will choose to design transdisciplinary events with universal access in mind to facilitate further participation from such communities.

**Societal Impact and Policy Influence:** The qualitative data collected from the workshop is being used to direct four PhD projects that address systemic barriers. The work is currently influencing:

- **AI Regulation:** Shaping how artificial intelligence is implemented in transport to ensure safety and equity.

- **System Reform:** Building an evidence base to advocate for a national transport system with equal access for all.
- **Driver Support:** Assisting older adults in the transition to retiring from driving.
- **Amplifying Voices:** Providing a platform for those with disabilities to advocate for better public and active transport options.

**Follow up plans:** To ensure long-term sustainability, the project is establishing an external advisory group to root ongoing research in the community, with a follow-up dissemination event scheduled for 2027.



## Trauma-informed care for Maternity Settings.

**Trinity Academic(s):** Dr. Meg Ryan, Assistant Professor in Psychology, & Nicole Maiorano, Research Assistant, Trinity Centre for Global Health.

**Civic Partner(s):** Rotunda Maternity Hospital

**The Aim:** This study is conducted in collaboration with the Rotunda Maternity Hospital and applies a participatory methodology to develop, implement, and evaluate translational simulation methods to promote psychological trauma-informed care to improve service delivery within maternity care settings. Translational simulation methods involve teams of hospital staff and patient representatives training together by recreating scenarios of care between a patient and staff member in as near-reality as possible to promote psychological trauma-informed care to improve service delivery.

**The Beneficiaries:** Patients and staff at the Rotunda maternity hospital

**The Activity:** The research takes place within the Rotunda hospital and first involved a service-wide audit of current trauma-informed practices within the Rotunda Hospital. This captured current policies and practices, experiences of staff, and experiences of patients to holistically capture the hospital's current alignment to trauma-informed care. Staff (n=2000) and patient (n=750 per month) experiences of trauma-informed practices within the hospital are now being explored using surveys. The results of the policy review and survey will be synthesised by the research team to create an organisational roadmap for trauma-informed care. This roadmap will provide concrete steps that the Rotunda can take to move towards trauma-informed care. Steps may include revisions to current policies, focuses for additional staff trainings, and other provisions to increase support for staff and patients within the hospital. The roadmap will guide future plans to co-design trauma-informed training simulation scenarios for use within a maternity hospital setting.

**The Outputs:** This project will deliver a toolkit for trauma-informed care training that has been uniquely adapted to the needs of the Rotunda, and a roadmap for delivery of trauma-informed care within the hospital. In addition, three manuscripts are in currently preparation which detail the following:

- 1) A Systematic Method for Policy Reviews,
- 2) Trauma-Informed Care in a Maternity Hospital: A Review of Organisational Policies and
- 3) Trauma-Informed Care in Maternity Settings: A Scoping Review.

**The Societal Impact:** The objective of this project is to ensure that appropriate trauma-informed support is provided to women who attend the Rotunda Maternity Hospital, in particular to women who come from marginalised communities or through their experiences of trauma or mental health difficulties are feeling marginalised. For those with a history of psychological trauma, accessing reproductive health services can be a triggering experience, which can manifest as challenging interactions between patients and staff, patients delaying or avoiding seeking care, and can contribute to worse patient outcomes. Likewise, for staff within reproductive health care services, collaborating with individuals who experienced trauma may trigger these past traumas or lead to elevated levels of burnout or vicarious trauma. Trauma-informed care has been shown to lead to better outcomes for service users and lower rates of burnout for staff.



**Follow up plans:** A second phase of the project is planned in order to facilitate development of co-designed simulation scenarios for use within a maternity hospital setting. The co-development of the simulation scenarios will be achieved using a mixed-methods, collaborative approach informed by the data collected in outlined above to ensure contextual relevance to the Rotunda Hospital. Co-development of the simulation scenarios will take place through stakeholder consultation with staff and service users from the Rotunda Maternity hospital, using a series of collaborative workshops.

## Exploring forced migrants' perspectives to improve sexual health

### Trinity Academic(s):

Dr Felicity Daly, Assistant Professor in Global Health, Trinity Centre for Global Health.

### Civic Partner(s): Sexual Health Centre (Cork)

**The aim:** This project explores forced migrants' experiences of the Sexual Health Ambassador (SHA) training programme delivered by The Sexual Health Centre in Cork. The training intends to empower people seeking international protection to address their sexual and reproductive health and serve as peer sexual health educators within Direct Provision centres. A key objective of the study is to enhance cultural competency of the Sexual Health Centre's training and services for this vulnerable population. Findings will also provide a case study of how health promotion delivered to forced migrants supports their engagement with health services to meet their sexual and reproductive health needs.

**The Beneficiaries:** The organisational beneficiary is the Sexual Health Centre, and the target group is forced migrants who have completed the SHA training currently or formerly living in Direct Provision centres.

**The Activity:** This project was co-created with the Sexual Health Centre to provide research capacity to evaluate the impact of their Sexual Health Ambassador training programme. From January 2025 to present the PI has engaged with the CEO, Head of Operations and Outreach Health Promotion Officer for project implementation, including respondent recruitment. The target group are 60 individuals who have completed the Sexual Health Ambassador training. 19 individuals responded to an online survey (July - November 2025) about experiences of the training programme and utilisation of the training content to address their own or someone else's sexual health needs. Focus group discussions are ongoing at present engaging the same cadre by utilising survey findings to further explore factors that have facilitated utilisation of sexual health information, perceptions of interactions with sexual health service providers and identifying what could further develop capacity to communicate their sexual and reproductive health needs to service providers.

**Immediate Outcomes:** An Evaluation Report for the Sexual Health Centre presenting survey results and synthesised published evidence of forced migrants' perspectives on sexual health training delivered in Europe and benchmarked the SHA training curriculum to an EU funded Culturally Sensitive Educational Package for Migrants' Sexual Health Education.

**Planned peer-reviewed publications will present:**

(1) survey data on improving SRH knowledge and focus group data about what facilitated utilisation of sexual health information; and (2) focus group data on perceptions of interactions with sexual health service providers and what could further develop capacity to communicate their sexual and reproductive health needs to service providers.

A Policy Brief will be developed based on strategic opportunities to inform national sexual health and inclusion health stakeholders.

A capacity building event will disseminate project findings to stakeholder groups in the migrant rights sector in Cork and others to build on the model of the Sexual Health Ambassador training.

**Societal Impact:** The broader impact of the SHARE project to address sexual health disparities of people seeking international protection in Ireland is nascent and will be further developed and explored through the end of the project (April 2026) and beyond. To date, the opportunity to answer survey questions has provided SHA training participants with the opportunity to express their experiences, identify the sexual health information most useful to them and suggest ways the training could be developed in the future. Moreover, participation in focus group discussions has provided a dedicated safe space to discuss how sexual health information has been utilised and reflect on what occurs when they express their needs to sexual and reproductive health service providers (e.g. Sexual Health Centre, community health services, GP surgery, other).

**Follow up plans:** To be developed at project end (April 2026 and beyond). Qualitative data from focus group discussions will be utilised as 'pilot data' for future funding and efforts to expand the research agenda to address the sexual and reproductive health needs of forced migrants in Ireland with culturally competent, trauma-informed care.

**For more details go to:** <https://www.sexualhealthcentre.com/ambassador-training-programme>



# Understanding Experiences of Healthcare Access of Vulnerable Migrant Women in Ireland

## Trinity Academic(s):

Dr. Emer McGowan, Assistant Professor (Medical Education),  
Ms. Laura Fitzharris PhD student, Dr. Julie Broderick (UCD)

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## Civic Partner(s):

Crosscare and Migrant Health Alliance Ireland.

**The Aim:** Migrant women face intersectional disadvantage due to the combined impact of their gender and immigration status. This can result in significant barriers to accessing essential services. Healthcare vulnerabilities arise from issues including language barriers, poverty, discrimination, gender specific needs, and cultural gaps, leading to delayed care and poor health outcomes. These factors, combined with trauma and displacement, can impede access. Limited data exists on the experiences of migrant women accessing healthcare in Ireland.

**The Activity :** This study aimed to explore the experiences of female asylum seekers, refugees, and undocumented migrants to accessing healthcare in Ireland by interviewing twenty migrant women living in Ireland.



The research was framed within a phenomenological paradigm, allowing for exploration of the meanings, values, and concerns surrounding migrant women's experiences in accessing healthcare since their arrival in Ireland.

Between September 2024 and May 2025, semi-structured interviews were conducted with asylum seekers, refugees, and undocumented migrant women regarding their experiences of accessing healthcare in Ireland. The approach combined descriptive methods with reflexive thematic analysis in accordance with the Reflexive Thematic Analysis Reference Guide (RTARG).

**Immediate Outputs:** The research found that:

- Migrant women encounter unique and interconnected challenges when it comes to accessing healthcare.
- Four key themes were identified from analysis of the data: (1) community support is key; (2) poor integration impedes access; (3) lived experiences shape expectations; and (4) navigating the complexities of the healthcare system.
- This study highlights that migrant women face various barriers, such as accommodation, transportation issues, and language difficulties, which complicate their adaptation to a new country and hinder their access to healthcare systems.
- To address these challenges, specific recommendations should be followed to ensure delivery of targeted, gender-sensitive, and culturally appropriate care.

- This can be achieved by fostering connections with social support systems and offering clearer information about healthcare resources and available services upon their arrival.

**Follow-up plans:** This study advocates for a culturally competent healthcare system that fosters understanding and trust. It highlights the crucial role of non-governmental organisations (NGOs) in addressing service gaps. It proposes sustainable solutions, including training health professionals in cultural responsiveness particularly in the delivery of mental healthcare and perinatal care for migrant women.

To tackle these challenges, a gendered approach to policy (one that reflects the impact of gender/unique vulnerabilities and immigration status on access) is suggested. This study recommends flexible primary healthcare models and collaboration with NGOs. One proposed strategy involves developing a culturally informed health promotion programme led by migrant women, in partnership with healthcare professionals and government agencies, focusing on health screening, perinatal care, and mental health support.

#### *Acknowledgements*

Participants were recruited through Migrant Health Alliance Ireland and Crosscare, both of which served as gatekeepers for this study.

## Targeted Exercise and Protein Supplementation for Women

### Trinity Academic(s):

Dr. Julie Broderick, Adjunct Associate Professor, Physiotherapy, Fiona Kennedy (Physiotherapist and PhD Candidate), Trinity College Dublin,

### Civic Partner(s):

Merchants Quay Ireland (MQI) – ‘Jane’s Place’.

**The Aims:** The LEAP-W (Low-threshold Exercise and Protein for Women) project aims to explore the feasibility and holistic impact of a targeted exercise intervention on women with complex social care needs. The action specifically seeks to combat “younger frailty”—the early onset of chronic illness and disability often observed in populations experiencing homelessness and addiction. By integrating a trauma-informed and gender-sensitive approach, the project aims to improve physical functioning, reduce pain, and enhance mental well-being for women who frequently find traditional healthcare services inaccessible.

**The Beneficiaries:** Women experiencing homelessness, addiction, and mental health challenges in Dublin, specifically those accessing women-only day services.



**The Activity:** The activity consisted of a 10-week mixed-methods feasibility study conducted between February and July 2024 at ‘Jane’s Place’, a women-only day service in Merchants Quay Ireland. A total of 33 participants were recruited for the “low threshold” programme, which was co-designed through workshops with service users and staff to ensure the design met their specific needs and health literacy levels.

The intervention featured three flexible sessions per week: two multi-modal exercise circuits and a weekly “park walk” in nature. Classes were accompanied by music selected by participants to foster a relaxed, stimulating environment. Following each session, women were provided with a 20g protein supplement (Fresubin) to support muscle synthesis. The programme’s flexible “drop-in” design allowed women to participate regardless of their stage in the addiction journey, provided safety was maintained.

**Immediate Outputs:** The project resulted in the publication of a high-impact research paper in [BMJ Open \(2026\)](#), detailing the feasibility and impact of the LEAP-W intervention. Tangible research findings demonstrated that the programme was safe and acceptable, with high adherence to both the exercise and nutritional supplements among participants. Quantitative outputs showed statistically significant improvements in strength (chair stand test), balance (single-leg stance), and mental health scores. Furthermore, the project generated a conceptual framework for trauma-sensitive exercise delivery, identifying key qualitative themes such as the “power of exercise” and the unique “LEAP approach” to engagement.

**Societal Impact:** LEAP-W advanced solutions to the social exclusion of women by providing a safe, gender-specific forum for health improvement. Participants reported that exercise served as a vital coping strategy, distracting them from the “unrelenting stresses of life” and providing a sense of purpose amid chaos.

A notable benefit reported was improved pelvic floor control, which significantly boosted confidence and mood.

The action fostered social change by building camaraderie and social capital among women who previously felt isolated, with many describing the group as “awakening confidence”. By addressing “younger frailty”—with a participant mean age of just 41 years—the project highlighted a critical public health issue and proved that a non-judgemental, low-threshold approach can successfully engage individuals who feel undeserving of a healthy lifestyle. Ultimately, the study benefits the health system by providing an evidence-based model for preventing costly unscheduled hospital admissions through community-level physical rehabilitation.

**Follow-up Plans:** The success of LEAP-W has laid the groundwork for a longitudinal study to further investigate the effectiveness and sustainability of exercise interventions in inclusion health. This work currently forms the basis of a PhD thesis for Fiona Kennedy, supported by the Trinity 1252 Scholarship Program and the Irish Research Council. To prevent the “grief of abandonment” expressed by women when the study ended, the team is working with partner organisations to establish a permanent once-weekly instructor-led class. Additionally, the model has been adapted for replication in other locations, with peer-led initiatives like the “Park Walk” continuing to empower former participants in the wider community.

## Understanding mental health and loneliness in older people with HIV

### Trinity Academic(s):

Professor David Robinson, Consultant Geriatrician, St James's Hospital, Associate Professor in Medical Gerontology, Trinity College Dublin, Dr Louise Brennan, Social Prescribing Coordinator, St James's Hospital, Adjunct Assistant Professor, Discipline of Physiotherapy.

**Civic Partner(s):** Platinum Clinic for older people living with HIV (OPLWH), St James's Hospital (SJH); HIV Ireland; and the Health Services Executive (HSE).

**The Aim:** This project focuses on developing an evidence-based understanding of mental health challenges and loneliness among individuals aged 50 and over living with HIV in Ireland. By comparing clinical findings with data from The Irish Longitudinal Study on Ageing (TILDA), the initiative identifies specific health inequalities. The ultimate goal is to co-design a social prescribing model with patients and stakeholders to improve social connectedness and well-being.

**The Beneficiaries:** The primary beneficiaries are people over 50 living with HIV, alongside clinicians, social prescribers, and the broader Irish healthcare system.

**The Activity:** The project utilizes a four-phase multidisciplinary approach to link acute care with community support:

- **Phase 1 (Q4 2026):** A comprehensive survey of approximately 200 adults at the GUIDE Clinic (St James's Hospital) to assess mental health and social participation.
- **Phase 2:** In-depth interviews with 25 participants to explore the "lived experience" of stigma, ageing, and isolation.
- **Phase 3 (Early 2027):** A comparative analysis using TILDA data to pinpoint disparities between this cohort and the general population.
- **Phase 4 (Q3 2027):** Multi-stakeholder co-design workshops involving patients, HIV Ireland, and HSE clinicians to develop a tailored hospital-based social prescribing pathway.

**Immediate Outputs:** The initiative will produce a public-facing research report with HIV Ireland and a national dissemination event to influence HSE service priorities. Academic outputs will include peer-reviewed publications on structural inequalities. Clinically, it will establish a "Social Prescribing for HIV" pathway with formal operating procedures and metrics for national replication.

**Societal Impact:** This work advances health equity by addressing the “double stigma” of HIV and ageing. It strengthens democratic values by ensuring marginalised voices shape healthcare through a Public and Patient Involvement (PPI) Advisory Group. Systemically, it supports the Sharing the Vision policy by creating a scalable, cost-effective model that prevents mental health crises and integrates hospital and voluntary sectors.

**Follow-up Plans:** Following the co-design phase, the pathway will be implemented at St James’s Hospital, with national expansion planned through the HSE Sexual Health Programme. The team intends to apply for longitudinal funding to evaluate the economic impact and establish a PhD programme focused on outcomes for older people living with HIV. The platform will also be integrated into international research collaborations



## Building Interdisciplinary Partnerships for Research into Endometriosis Diagnosis and Care

### Trinity Academic(s):

Professor Cliona O’Farrelly, Chair in Comparative Immunology, Dr. Nollaig Bourke, Associate Professor, Medical Gerontology, Dr. Aoife O’Neill, Consultant Obstetrician and Gynaecologist, Tallaght University Hospital. Dr. Louise Glover, PhD Senior Researcher, Merrion Fertility Unit.

### Civic Partner(s):

Merrion Fertility Clinic; National Maternity Hospital; Tallaght University Hospital; Endo Ireland.

**The Aim:** This action brings together researchers, clinical specialists in endometriosis, and Endo Ireland, the national support and advocacy organisation for people with endometriosis, to respond to the long-standing neglect of the condition in research and healthcare. The aim is to build links between research, clinical care, patient experience, and policy discussion. The project seeks to improve understanding of endometriosis-related infertility, support earlier and less invasive diagnosis, and generate evidence that can inform clinical guidelines and women’s health policy. A further aim is to raise the profile of women’s health research within the university,

healthcare system, and wider society through partnership, engagement, and communication activities.

**Target Group/Beneficiaries:** Women with endometriosis, patient advocacy groups, clinicians, researchers and policymakers.

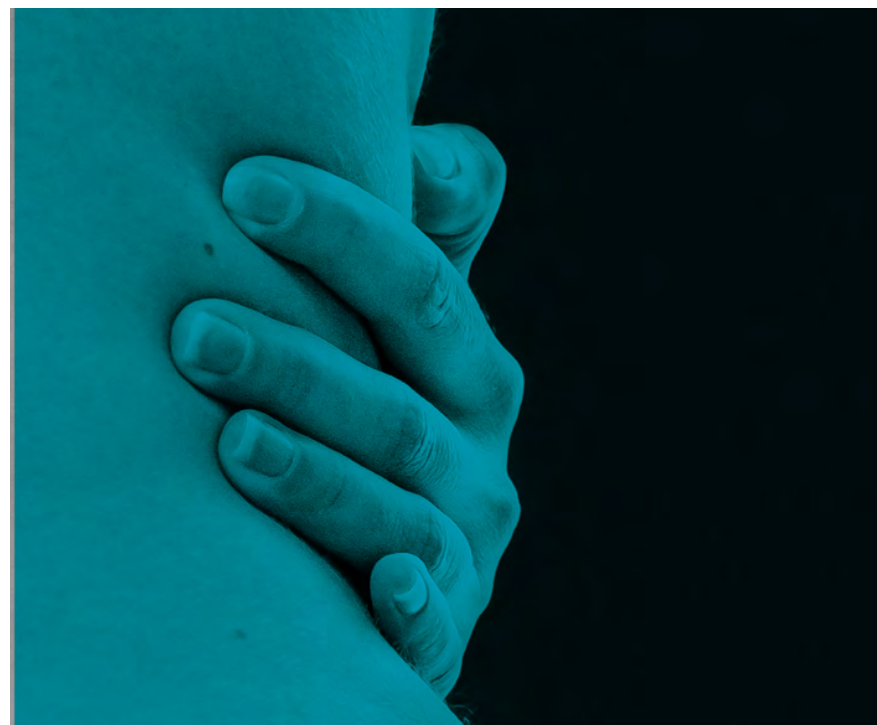
**The Activity:** Running from 2026–2030, this action is the first of its kind for this interdisciplinary team. It is also the first time the endometriosis service at Tallaght University Hospital has taken part in a research collaboration. Women with endometriosis donate biological samples that are analysed to understand immune patterns linked to the condition. Endo Ireland, through representative Geraldine Canning, brings community priorities into the project and supports patient involvement through ongoing consultation. The team also plans to organise public lectures and engagement events to share its work more widely. Early activity already includes one researcher visiting secondary schools to talk about endometriosis and the importance of women’s health research, helping to raise awareness among younger people.

**Immediate Outputs:** The project will generate detailed research on immune changes linked to endometriosis and infertility. This will support the identification of potential biomarkers

and contribute to work toward earlier and less invasive diagnosis. Communication activities will increase awareness of endometriosis and women's health, both within Trinity and partner hospitals and at a wider public level through talks, educational engagement, and planned public events. Workshops and seminars will share learning with clinicians, advocacy groups, and policymakers. An important output in itself is the establishment of a strong interdisciplinary team focused on women's reproductive health, building long-term capacity to improve understanding, visibility, and care for endometriosis in Ireland.

**Societal Impact:** This action addresses a major health inequality by focusing on endometriosis, a condition affecting 1 in 10 women that has been historically under-recognised and underfunded by working towards earlier and less invasive diagnosis, the project aims to reduce years of untreated pain, delayed care, and the wider personal and social impact of living with endometriosis. Women with endometriosis benefit through meaningful involvement in shaping research and healthcare priorities, which in turn strengthens the work of clinicians and researchers. Communities benefit from increased awareness of menstrual and reproductive health, helping to challenge long standing stigma and silence. Clinicians gain access to stronger evidence and new diagnostic approaches, while policymakers gain data to support reform of women's health services. Through close collaboration with patients and clinicians, the project elevates women's health research as a visible and urgent priority for healthcare planning and policy development.

**Follow up plans:** The project already has two first year PhD students working on endometriosis and reproductive immune health, alongside four master's students currently involved in the research. In March, the team applied for a €200,000 HRB Applied Partnership Award in response to a national call for women's health research that specifically highlights endometriosis as a priority area. Ongoing work will continue to expand sample collection and strengthen collaboration with Endo Ireland.



## Supported Volunteering: Working Together

### Trinity Academic:

Dr Sarah Quinn, Discipline of Occupational Therapy.

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### Civic Partner(s):

HSE (Dr Leonie Boland), Vision Ireland (Pauleen Byrne), Volunteer Ireland (Zsé Varga), Focus Ireland (Daniel Hoey).

### The Aim:

1. To promote inclusion and support participation of individuals with experience of mental health issues and/or homelessness (the community partner) in their local community.
2. To provide opportunities for community partners to build a weekly routine and serve their community through voluntary work.
3. For students to learn collaboratively from and with their community partner(s)

**The Beneficiaries:** Individuals who use community mental health and/or homeless services and Undergraduate occupational therapy students.


**The Activity:** Volunteer Ireland located supported volunteering opportunities and following training and preparation sessions developed by Volunteer Ireland, approximately six-eight occupational therapy students are paired with six-eight individuals who use community homeless and/or mental health services (their community partner). The dyads volunteer together as peers in local Vision Ireland

charity shops. This community-engaged learning experience is an integral part of students' Study of Occupation module (OTU11012) and takes place for two hours every Wednesday across both semesters. Students call or text their partner as a reminder every Tuesday; the dyad travel to the shop together where they engage in a variety of shop work alongside other volunteers and interact with the public as required. The students have weekly debriefing sessions with faculty staff and community partners have therapeutic support from their HSE occupational therapist. Clear and open communication pathways have been found essential to supporting the activities within this project.

**Immediate Outputs:** The Supported Volunteering: Working Together project won the prestigious AOTI [Ann Beckett Award](#) 2024 and was showcased on [Alive & Kicking](#) with Claire McKenna, Newstalk Radio, in November 2024.

The project has demonstrated the feasibility of supported volunteering as an emerging model of promoting social and community participation. The model was presented at:

- [ENOTHE Annual Meeting, 25th October 2025](#), in Coimbra, Portugal.
- [THE Conference, 4th March 2026](#), Trinity College Dublin.
- Findings from empirical participatory research with Focus Ireland, exploring the appetite and feasibility of the project, are currently being prepared for publication.



**Societal Impact:** It is broadly recognised that individuals with experience of homelessness and mental health issues are at risk of social exclusion. Practical engagement and the meaningful integration of lived experiences is essential to build institutional capacity in inclusive education and to equip students to meet the specific needs of marginalised groups. This project provides unique learning opportunities for occupational therapy students, using engaged pedagogies to work in partnership to build the skills required for collaborative practice. Preliminary analysis of research findings demonstrated that students developed skills in relationship building and empathy while both members of the dyad grew in confidence. Creating opportunities for students and community partners to work collaboratively was key to the community partners' reconnection with their local communities and the embedding of new activities into their weekly routines.

**Follow up plans:** By strengthening our relationships with community services and practicing occupational therapists, and facilitated by our PPI funded celebration (21st October 2025), we have been enabled to extend the research of this model to include individuals from additional health and social care services and to broaden the choice of volunteering opportunities beyond charity shops. Delivered in collaboration with the HSE and charities such as Vision Ireland; Supported Volunteering: Working Together is now embedded in the occupational therapy curriculum as an option for fresher students' community-engaged learning. In September 2026 we will double the number of students being offered this experience.

## Pillar 2: Promoting Community Health Through Creative Engagement

*“Reflective, compassionate to the self and to others. A human story told in a way that allows for understanding of the complexities of illness - for the patient + the staff. Grateful to have had the time to see it. “*

Anonymous audience member  
at SoloSirens Production



## Creative Arts in Cancer Care and Survivorship

### Trinity Academic:

Professor John Kennedy, Medical Director, Trinity St James's Cancer Institute (TSJCI). Dr. Kevin McCarroll, Consultant Geriatrician & Director of Creative Life, Mercer's Institute for Successful Ageing (MISA).

**Civic Partner(s):** SoloSIRENs; Irish Hospice Foundation.

**The aim:** The Tightrope Walker, a SoloSIRENs production, aims to explore illness & recovery in a Public facing event. The theatrical performance navigates a woman's journey through the chaotic and profound territory of illness and recovery and aims to facilitate a safe, creative space where stories of serious illness and the emotions associated with a cancer diagnosis can be explored. By bringing a theatrical production into the hospital setting, the project seeks to dispel taboos surrounding illness, foster connections between patients, families, and healthcare staff, and use the arts to enhance the understanding of cancer survivorship and recovery. It promotes a collaborative environment where knowledge exchange between the clinical institute and the community is multi-directional.

**The Beneficiaries:** Cancer patients, survivors, their families, healthcare professionals, and the wider public, specifically those navigating the healthcare system in the Dublin 8 region.

**The Activity:** The Tightrope Walker is a theatre production by writer/performer Jenny Macdonald, and is set in an imagined hospital waiting room. It explores the performer's experience of illness and navigating the healthcare system. It shares the grief and loneliness serious illness can bring. It also shares how challenges can build capacity to care and to create community. Jenny's story is interwoven with opportunities for the audience to consider their own experiences. It offers an ultimately uplifting framing of the relationships between challenge, love and care. Despite its serious subject matter, it features humour and warmth.

This performance of The Tightrope Walker at St James's Hospital is in association with Creative Life, MISA and the Trinity St James's Cancer Institute, with thanks to co-funding from SJHF-CL and Roche Products (Ireland). The performance was also supported by the Arts Council, Irish Hospice Foundation and Civic and South Dublin County Council. Professor John Kennedy and Dr Kevin McCarroll (Director of Creative Life) led the event, which was set in an imagined hospital waiting room. The two-hour performance navigated a woman's journey through the chaotic territory of illness and recovery, inviting the audience to be co-participants.

Approximately 100 participants attended, including clinicians and the public, engaging in physical actions and sharing their own reflections on the grief and loneliness that serious illness can bring, balanced with themes of care and connection.

**The outcome:** The primary output was the successful delivery of a public performance within a clinical environment, demonstrating the feasibility of integrating professional theatre into acute hospital settings. The project also produced a collaborative framework between oncologists at the TSJCI and artists from the SoloSIRENs collective. Furthermore, the event generated immediate qualitative feedback from participants, many of whom noted the performance's rare level of generosity and insight into the patient journey. It also served as a showcase for the "Creative Life" pillar's intergenerational approach to Arts and Health.

**The Societal Impact:** The Tightrope Walker, a SoloSIRENs production, acknowledges the social isolation often experienced by cancer patients by humanising the hospital environment and fostering a sense of community. By using the metaphor of a "tightrope" between grief and gratitude, the project provided a new vocabulary for patients to discuss the physical and emotional forces of serious illness. This engagement broke down barriers to health education, making the concept of survivorship more accessible and relatable. For healthcare professionals, it enhanced empathy and communication skills, contributing to a more compassionate care model within the Irish healthcare system.



**Follow up plans:** Following the 2026 performance, the team plans to integrate these creative methodologies into the "Medicine and Humanities" module for Trinity medical students to foster social responsibility in future doctors. Plans are also underway to establish a regular storytelling series in collaboration with the Dublin Story Slam to continue dispelling the stigma surrounding cancer. Prof John Kennedy's leadership, recently recognised with a Lifetime Achievement Award for improving Irish healthcare, will be instrumental in scaling this "Arts and Health" model to other oncology institutes nationally to improve long-term patient wellbeing.

**For more information,** read Jenny McDonald's 'Strange Gifts: Community and Connection in Illness and Performance' perspective [here](#).

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## Meaningful Arts Engagement in the LBD Community

### Trinity Academic:

Professor Iracema Leroi, Professor in Geriatric Psychiatry and Site Director of Global Brain Health Institute.

### Civic Partner(s):

The Abbey Theatre, SoloSirens, Alex Kornhuber (independent artist), Cathy Fowley (independent artist), Nicholas Johnson (Professor of Drama, Trinity College Dublin), Kate Irving (Professor of Clinical Nursing at Dublin City University)

**The Aim:** The EMERALD-Lewy programme focuses on improving the diagnosis, management and lived experience of Lewy body dementia (LBD) in Ireland and was granted funding from the Health Research Board's Knowledge Translation Award to explore the lived experiences of the LBD community through creative means. This involved developing two arts-based initiatives: firstly, Keepsake Chronicles, explored the lived experiences of those with LBD and the second, a drama workshop, explored the lived experience of LBD care partners. The objective was to generate new insights into lived experience, challenge stigma and promote greater public and professional understanding of LBD through creative dissemination.

### Lives

I feel I have had  
a couple of lives in my life;  
life gone, more on the way.

Everybody has  
another life. Other lives.  
That was one life.

I go with the flow  
if I can. It's just saying  
I'm going to hold on

for longer

for a while.



By Martin

**The Beneficiaries:** People living with Lewy body dementia, their family, care partners, professionals, and the general public.

**The Activity:** Keepsake Chronicles brought together three individuals living with Lewy body dementia to share personal stories connected to meaningful keepsakes. Sessions were held in person in Dublin throughout 2025 and were facilitated by Kate Irving: a professor of clinical nursing who has experience caring for her mother who has dementia, Alex Kornhuber: a professional photographer, and Cathy Fowley: a professional writer. Together, these artists transformed participants lived experiences into visual and poetic forms for wider dissemination.

**The Outcome:** Keepsake Chronicles sessions resulted in a professionally documented collection of stories, photographs and “found poetry,” later compiled into a bound book for dissemination across dementia networks, academic audiences and the general public.

The care partner workshop produced a series of creative tableaux and reflective materials that illustrate embodied caregiving experiences, generating a novel qualitative dataset that complements more traditional research approaches. Both activities contributed to methodological innovation by demonstrating how arts-based approaches can capture aspects of lived experience often missed by common research tools.

**The Societal Impact:** The actions outlined above supported people with Lewy body dementia and their care partners to voice experiences that are thus typically overlooked. Participants expressed a sense of enhanced wellbeing, validation and a strengthened sense of identity and community belonging. The creative outputs improve public and professional understanding of Lewy body dementia by presenting lived experiences in accessible, human-centred formats.

These projects promote democratic values by ensuring that those affected by the condition influence how their stories are represented. They also contribute to the health system by highlighting care challenges, emotional labour and unmet needs, supporting more person-centred, compassionate dementia care.

**Follow up plans:** Keepsake Chronicles is currently being expanded into other areas of the country outside of Dublin. For example, preparations are already underway for an iteration in Cork. The work from the first iteration is also being publicly exhibited during an open day that EMERALD-Lewy is holding on World Lewy body dementia day on January 28th. The care partner workshop that was piloted will be refined based on feedback from the Lewy body dementia care partners who took part and replicated with new groups.

## Creative activity in the ageing population

### Trinity Academic:

Regius Rose Anne Kenny, Principal Investigator of Ireland's largest adult population study on the experience of ageing in Ireland - The Irish Longitudinal Study on Ageing (TILDA)

### Civic Partner(s):

Creative Ireland, Department of Culture, Communications and Sport.



**The Aim:** The aim of this action was to examine participation in arts, creative and cultural activities among older adults and the effects on health and wellbeing in Ireland using data from TILDA. The action examined the associations between participation in these activities and physical, mental, and behavioural health outcomes, as well as the long-term benefits of participation.

**The Beneficiaries:** Adults of all ages, Policymakers, Creative Ireland, Arts & Cultural Organisations

**The Activity:** This civic engagement activity arose from a research collaboration with Creative Ireland, an all-of-government culture and wellbeing programme supported by the Department of Culture, Communications and Sport, whose ambition is to inspire and transform people, places and communities through creativity. TILDA examined participation in arts, creative and cultural activities across Wave 1-5 initially, with an in-depth look at participation at Wave 6, including barriers to participation and the impact of the pandemic. The findings examined the associations between participation with quality of life, loneliness, depression, stress, behavioural health and long-term wellbeing.

**The Immediate Outputs:** Two public reports were published written in accessible language. These provided detailed analysis of creative participation among older adults and their effects on health and wellbeing; and policy-relevant recommendations. The research provided valuable insights into the participation of older adults in arts, creative, and cultural activities in Ireland and the potential benefits for their health and wellbeing. It found that participation in creative activity is high among the older adults and that those who participate in these activities experience higher quality of life and lower depression, stress, worry and loneliness compared to older adults who do not. Policies addressing lower participation levels in these at-risk groups and increasing access to creative activities in the community may act as a means of improving health and wellbeing.

**Societal Impact:** The findings demonstrate that participation in creative activities is associated with higher quality of life and lower loneliness, depression, stress and worry. Participation was socially patterned, with lower engagement among men, those with lower education and income, and rural residents. Evidence from the reports supports policy design aimed at increasing access to creative programmes for at-risk groups, contributing to improved mental wellbeing, social inclusion and healthier ageing across Ireland.

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**Follow up plans:** Creative Ireland has funded a follow-up research collaboration with TILDA that will examine the influence and impact of arts and creative activities on flourishing, a positive mental health state in which individuals feel good and function well, in individual and community life. As part of Wave 7 data collection, additional questions were added to the TILDA questionnaire to measure flourishing in collaboration with University College London.

**For more information:** [Creative activity in the ageing population](#)





# Pillar 3: Planetary Health and Sustainable Healthcare

*“There is something in the air that is killing us in Africa, sometimes slowly, sometimes fast. It is made largely by men in the global north, and it is getting worse. But we, as a public health sector, have all the tools we need to control, at least in part, the substance.”*

**Dr. Matthew Chersich,**  
Discipline of Public Health & Primary Care,  
School of Medicine.

# Protecting Public Health in a Changing Climate

**Trinity Academic:**

Professor Cathal Walsh and Dr. Matthew Chersich, Discipline of Public Health & Primary Care, School of Medicine

**Civic Partner(s):** World Health Organization (WHO); and various African national health departments.

**The Aim:**

The Global Heat Attribution Project (GHAP) aims to establish a sophisticated data science ecosystem and a data visiting federated analysis framework to quantify the causal links between extreme heat and public health outcomes. By reanalysing millions of records from population registries and birth cohorts, the project seeks to determine if variations in health can be attributed to specific climate vulnerabilities or a lack of adaptive interventions. Ultimately, GHAP provides the evidence base necessary to demonstrate the scale of heat-related harms and the urgency for integrated national climate-health policies.

**The Beneficiaries:** Pregnant and postpartum women in sub-Saharan Africa, national health policymakers, global health researchers, and disadvantaged urban communities living in high-density informal housing.

**The Activity:** The Global Heat Attribution Project utilizes a cutting-edge “data science ecosystem” to conduct federated data analysis across multiple African countries. To overcome data privacy and sharing concerns, the project employs a “data visiting” approach instead of traditional data acquisition, allowing researchers to reanalyse large-scale, individual-level databases in situ. This activity encompasses the reanalysis of the Western Cape Provincial Health Database (covering 770,000 births) and private health insurance data for 3.3 million members in South Africa. Using traditional time-series statistics and advanced causative machine learning, the project identifies temperature thresholds, lags, and high-risk groups across diverse climate zones. By pooling records from nine African countries, GHAP maps how various heat exposures—influenced by humidity, housing type, and socioeconomic status—link to incident health conditions.

**Immediate Outputs and Outcomes:** The primary output of GHAP is a field-tested federated analysis framework and a robust data science ecosystem capable of processing millions of records across international borders. The project has facilitated a massive Individual Participant Data (IPD) meta-analysis, harmonising health outcomes with critical environmental variables like vegetation indices, air pollution, and housing types. Additionally, GHAP has driven the standardisation of mental health measures across multiple international birth cohorts. Key research findings, such as those published in *Nature Medicine*, quantify specific risks, demonstrating that every 1°C increase in heat correlates with a 4% increase in preterm birth risk, providing essential data for evidence-based advocacy.

**Societal Benefits:** By attributing specific morbidities to climate change, GHAP promotes social justice for vulnerable populations living in “tin-sheet” informal housing where indoor temperatures often exceed 6°C above outdoor levels. The project fosters democratic values by providing data that empowers community leaders to advocate for heat-resilient infrastructure and urban greenery. For the health system, it provides a foundational evidence base for national programmes on climate change and health, ensuring maternal and child services—the cornerstone of many health systems—can adapt to future warming. Ultimately, GHAP demonstrates that “data visiting” can humanise climate statistics, replacing climate anxiety with a proactive, evidence-driven model for sustainable healthcare.

**Follow up plans:** GHAP serves as the essential data infrastructure for subsequent clinical research, including the BioHEAT-PLUS study, which evaluates co-designed interventions like nocturnal cooling and cash transfers. Future development involves expanding the federated analysis model to additional climate zones and countries. The project team is also planning consensus meetings with the WHO and national stakeholders to translate these findings into global policy and scalable clinical guidelines. Advocacy campaigns are being co-designed to communicate these results to healthcare professionals and the general public, further advancing Trinity’s commitment to a pluralistic and sustainable society.

**For more Information:** [Global Heat Attribution Project](#)



## Behavioural Insights for Climate Engagement

### Trinity Academic:

Dr. Kristin Hadfield, Associate Professor in the School of Psychology and the Trinity Centre for Global Health.

### Civic Partner(s):

Environmental Protection Agency (EPA), Behavioural Insights Unit; Dublin City University (DCU).

**The Aim:** To synthesise international evidence on climate change attitudes using a person-centred framework, and translate findings into practical recommendations for Irish climate communication, engagement, and monitoring. The work aimed to help the EPA and partner agencies identify relevant audience segments, anticipate drivers of scepticism and disengagement, and improve the effectiveness of climate action messaging and public engagement approaches.

**The Beneficiaries:** EPA Behavioural Insights Unit, and Irish policy and practice teams responsible for climate communication and public engagement.

**The Activity:** Commissioned by the EPA Behavioural Insights Unit, this action produced the EPA Behavioural Insights Series No. 1 report A Review of Climate Change Attitudes Using a Person-Centred Framework (published November 2024). Work involved structured evidence searching and synthesis, development of a person-centred conceptual framing, and iterative consultation with EPA colleagues to ensure direct policy relevance for Irish climate communication and engagement. The activity was completed in Ireland by a five-author team across DCU and TCD, with review and feedback from EPA staff. Direct beneficiaries were the EPA Behavioural Insights Unit and associated stakeholders who use the report to inform engagement and monitoring approaches.

**Immediate Outputs and Outcomes:** Immediate outputs were the published EPA Behavioural Insights Series report (No. 1, 2024) and supporting dissemination materials. The report consolidates the international evidence on beliefs and attitudes towards climate change and presents a person-centred conceptual framework to organise determinants across individual, family, peer, community, and wider structural contexts. It sets out actionable recommendations for tailoring messages to different audience profiles, strengthening engagement strategies, and monitoring shifts in attitudes over time, including signals of rising scepticism

in specific groups. Additional outputs included briefing slides and stakeholder discussions with EPA staff, and a public launch event, supporting wider uptake within policy and practice networks.

**Societal Impact:** This action supports evidence informed climate policy implementation by strengthening the engagement tools available to national agencies. By emphasising heterogeneity in attitudes, it supports moving beyond one size fits all messaging and helps reduce the risk that communication strategies inadvertently reinforce polarisation or disengagement. In practical terms, the report provides a credible synthesis and a set of recommendations that can inform campaign design, dialogue processes, and evaluation metrics used by public bodies, with potential downstream benefits for public understanding, trust, and engagement with climate actions. It also provides a reference point for Irish researchers and agencies seeking to align future monitoring and research on climate attitudes.

**Follow up plans:** Follow up has included continued engagement with the EPA on dissemination and application of the recommendations, and alignment with related EPA funded work on climate beliefs and climate related mental health.

**For more information:** [A Review of Climate Change Attitudes Using a Person-Centred Framework 2024](#)



## Embedding sustainability in medical curricula

### Trinity Academic:

Professor Colin Doherty, Consultant Neurologist and Director of the Epilepsy Service at St James's Hospital, Dublin and Dr Elaine Burke, Assistant Professor, Medical Education.

### Civic Partner(s):

ENCHE (European Network of Climate Health Educators)

**The Aim:** Climate change is the single biggest health threat facing humanity, according to the WHO. However, only 15% of medical schools have incorporated the relationship between climate change and health into their curricula. The mission of ENCHE (European Network of Climate Health Educators) of which Trinity is a member is to equip the next generation of medical practitioners with the knowledge to deliver sustainable healthcare practices and support the transition to patient-centric, net-zero health systems. ENCHE comprises a network of interested faculty across Europe to support effective and inspiring teaching for students, share best practices across leading universities, and connect leaders in their field from within and beyond academia.

**The Beneficiaries:** Current and future generations of healthcare practitioners.

**The Activity:** Network meetings take place monthly online, and in person bi-annually. TCD are represented at these meetings by Elaine Burke, Assistant Professor in Medical Education. Colin Doherty, Head of the School of Medicine, sits on the Steering Committee. The network's activities include development of a bank of resources for faculty, advocacy work, student-led developments, and creation of an expert faculty database. ENCHE recently launched a free online course on climate health for clinician educators which is running from March to May 2026. The certificate-based course comprises five climate and health foundational sessions, and ten specialty-specific sessions, and is open to clinicians and clinician educators from around the globe. Elaine will be contributing to the medical education session.

**Immediate Outputs:** The goals of ENCHE are to engage ~10,000 students over three years on sustainability within medical curricula, embed sustainability content in at least three national curricula in Europe, provide an online hub, and convene webinars and engagements to strengthen the network of interested experts and medical educators.

**Societal Impact:** Equipping current and future generations of healthcare practitioners with knowledge of sustainability, climate change and planetary health will benefit patients, the healthcare system, and the planet. Eco-conscious practitioners will actively minimise the environmental impact of healthcare; advocate for planetary health within healthcare settings and the wider community; develop holistic and patient-centred approaches to patient care that include environmental factors affecting health; share their knowledge with peers, patients and the community; and assume leadership roles in initiating and guiding sustainable practices.

**Follow up plans:** TCD faculty have connected ENCHE with IDE, Irish Doctors for the Environment, to progress the implementation of climate health education nationally and advocate for its inclusion in undergraduate medical and allied health professional curricula. IDE is a voluntary organisation focussed on promoting good health through care of the environment.





# Pillar 4: Shaping Evidence-Based Health Policy

*“International evidence clearly shows that the countries which perform best in the face of major health challenges are those that invest in research, value access to reliable, timely data and base their decisions on robust evidence.”*

HRB Strategy 2021–2025.

## Transforming Mental Healthcare in Irish Prisons

### Trinity Academic:

Professor Conor O’Neill, Clinical Associate Professor (Psychiatry).  
Professor Brendan Kelly, Professor of Psychiatry, Trinity College  
Dublin and Consultant Psychiatrist at Tallaght University Hospital.

**Civic Partner(s):** HSE National Forensic Mental Health Service (NFMHS), Irish Prison Service (IPS), HAIL Housing Support, and the Irish Court Service.

**The Aim:** The Prison Inreach and Court Liaison Service (PICLS) aims to identify persons with major mental illness within the remand prison system and arrange for their diversion from the criminal justice system to appropriate healthcare settings. By advocating that prisons are inappropriate environments for treating serious mental illness, the project seeks to deliver high-quality, patient-centred care, facilitate recovery, and reduce recidivism through robust interagency clinical pathways.

**The Beneficiaries:** Primarily male remand prisoners at Cloverhill Prison suffering from serious mental illness, many of whom are homeless or socially disconnected, as well as the Irish Court Service.

**The Activity:** Operating five days a week at Cloverhill Remand Prison, PICLS provides a multidisciplinary team—including forensic psychiatrists, nurses, and a housing support worker—to manage a high-turnover population. The activity centres on a systematic two-stage screening process for all new committals, followed by comprehensive psychiatric assessments and triage. The team attends Cloverhill District Court daily, providing expert reports and evidence to judges to facilitate “therapeutic jurisprudence”. Since 2014, the service has integrated a dedicated housing worker to ensure that homeless patients are supported with accommodation upon release, bridging the gap between clinical and social needs.

**The Results:** By early 2024, PICLS had facilitated over 2,000 successful diversions to community and forensic mental health services. This scale of impact is built on the systematic screening of over 40,000 new committals, resulting in detailed clinical assessments for more than 7,000 individuals. The service’s pioneering “STRESS-testing” model for longitudinal evaluation has been published in high-impact international journals, providing a global framework for risk-appropriate diversion and clinical efficiency. Furthermore, the service maintains a comprehensive PICLS Staff Manual to ensure standardisation and consistently meets or exceeds rigorous benchmarks within the Quality Network for Prison Mental Health Services.

**The Societal Impact:** The PICLS Project has fundamentally transformed how the Irish justice system manages mental health, advancing health equity for a population where psychosis prevalence is ten times higher than in the community. By diverting individuals from “toxic” and inappropriate prison environments to clinical care, PICLS promotes humane treatment and democratic values. A critical innovation is the integration of a dedicated HAIL housing support worker, which addresses the “revolving door” of homelessness by ensuring patients are supported with stable accommodation and clinical follow-up upon release. Ultimately, the project demonstrates that “therapeutic jurisprudence” can deliver measurable health gains, reduce recidivism, and provide a cost-effective model for interagency working that prevents the accumulation of mentally ill persons in the penal system.

**Follow up plans:** Future efforts focus on ensuring the sustainability of PICLS as prison populations grow to record levels. The team is advocating for specific enabling legislation to formalise court diversion processes nationally. Ongoing research continues to map clinical outcomes to refine the triage process, with plans to adapt the PICLS model for other remand settings across Ireland to ensure equitable access to mental healthcare for all.



## Experts to European Observatory Health Systems and Policies Network

### Trinity Academics:

Professor Sara Burke, Associate Professor, Professor Steve Thomas, Edward Kennedy Chair of Health Policy and Management, Dr Charlotte Myers, Research Fellow and Veronica Segerström, Researcher, Centre for Health Policy and Management.

### Civic Partner(s):

European Observatory on Health Systems and Policies

**The Aim:** This initiative provides rigorous, evidence-based reporting on Irish health system and policy reforms for the European Observatory on Health Systems and Policy Monitor (HSPM). Currently the Trinity team is leading the multidisciplinary author team for the 2025/6 Irish Health System in Transition (HiT) report. As the first comprehensive update since 2009, the HiT report is funded by the Health Research Board and the Department of Health. It is strategically scheduled for publication during Ireland's presidency of the European Commission in the second half of 2026.

**The Beneficiaries:** The primary beneficiaries include members of the general public, government officials, and the NGO sector. It serves as a vital resource for students of health sciences, medicine, nursing, and social policy. Additionally, international researchers and academics utilise this data to benchmark Irish health system performance against European counterparts.

**The Activity:** Professors Burke and Thomas act as national experts for the WHO/European Observatory, contributing to a global knowledge platform that provides comparative analyses of European health systems. Their ongoing activity involves reviewing national health profiles and interpreting complex policy developments in financing, governance, workforce planning, and service delivery. They regularly contribute to the bi-annual State of the Health EU report for Ireland, co-author comparative journal articles, and produce Observatory Policy Briefs that translate evidence into actionable policy analysis.

**Immediate Outputs:** The collaboration generates several tangible outputs to support national and international policy development. Key among these are regular updates to Ireland's page on [Health System and Policy Monitor, Overview](#), featuring detailed revisions to sections on governance, digital health, services and workforce. The flagship output is the forthcoming

Ireland HiT (Q3 2026). Furthermore, the team has authored high-impact policy briefs, including *Strengthening health systems resilience: key concepts and strategies* and *Reducing inequalities in cancer care: A health system approach to implementing change*. These resources provide the European policy community with accurate, timely intelligence for informed decision-making.

**Societal Impact:** These contributions strengthen democratic values by improving transparency and accountability within the Irish health system. By accurately representing complex reforms—such as universal health coverage and service reorganisation—this work empowers journalists, civil society, and decision-makers with unbiased information. It fosters participatory governance and informed public debate, highlighting critical areas requiring investment. Ultimately, these inputs shape policies that reduce health inequalities and build a more resilient, patient-centred system.

**Follow-up Plans:** Collaboration with the European Observatory is ongoing. In October 2026, Trinity’s Centre for Health Policy and Management will host the annual European Network meeting. This will coincide with a major Policy Dialogue hosted by the Irish Department of Health. The team will maintain real-time updates to the Health Systems and Policy Monitor HSPM, ensuring that health system performance data continues to drive better national health outcomes.



## Strengthening Europe's Health Workforce for an Ageing Population

### Trinity Academic:

Professor Roman Romero-Ortuno, Professor of Ageing Medicine & Frailty

### Civic Partner(s):

European Union of Medical Specialists – Geriatric Medicine Section (UEMS-GMS)

**The Aim:** This initiative coordinated the 2025 revision of the European Training Requirements (ETR) for Geriatric Medicine. The primary objectives were to update postgraduate geriatric training standards, secure formal endorsements from major international societies—including the EuGMS, EAMA, IAGG, and EICA—and align the ETR with the WHO Decade of Healthy Ageing (2021–2030). The revised ETR integrates competency-based education and Entrustable Professional Activities (EPAs) to strengthen geriatric care capacity across Europe.

**The Beneficiaries:** The primary beneficiaries include European national medical competent authorities, geriatric medicine trainees and trainers, and EU health-policy bodies. Ultimately, older adults across Europe benefit from these improved specialist training standards.

**The Activity:** From September 2024 to October 2025, Professor Romero-Ortuno chaired the UEMS-GMS ETR Review Committee. This multi-stakeholder process involved coordinating representatives from over a dozen European countries in a structured revision of official training standards. The activity included iterative drafting, multinational expert consultations, and formal endorsements from leading international bodies. The project featured sustained engagement with national regulators and academic partners to ensure the ETR met the needs of Europe's rapidly ageing population. The final ETR was formally approved at the UEMS Council Meeting in October 2025.

**The Outputs:** The main output is the formally adopted 2025 European Training Requirements for Geriatric Medicine, published as the authoritative European standard for postgraduate training. Key innovations include a modernised competency-based framework, expanded EPAs, updated theoretical knowledge content, and the incorporation of the European Geriatric Medicine Specialty Exam (EGeMSE) into recommended assessment standards.



**Societal Impact:** The 2025 ETR strengthens Europe’s ability to deliver high-quality, person-centred care by harmonising training standards and promoting excellence in geriatric practice. By advancing competency-based medical education and supporting the recognition of Geriatric Medicine as a primary specialty, the action advances EU priorities on healthy ageing and health-system reform. The framework also supports workforce mobility and promotes the development of geriatric services in countries where the specialty is still emerging. Ultimately, it equips future geriatricians to address multimorbidity and frailty, aligning with global healthy ageing goals.

**Follow up plans:** A Special Article summarising the ETR development and innovations will serve as a scholarly and policy-oriented reference to support adoption across Europe. Future work includes assisting national medical authorities in implementing the 2025 standards and facilitating the adoption of the EGeMSE exam. Professor Romero-Ortuno will continue collaborating with European partners to disseminate resources and evaluate early uptake. This initiative will also inform the next revision cycle planned for 2030.

## Informing national health system reform for older adults

### Trinity Academic:

Regius Professor Rose Anne Kenny (Principal Investigator, The Irish Longitudinal Study on Ageing (TILDA))

### Civic Partner(s):

Department of Health; Health Service Executive (HSE); Health Research Board; Family Carers Ireland; ALONE

**The Aim:** This action aimed to translate findings from the TILDA into policy-relevant evidence to inform health and social care planning for Ireland's ageing population. Drawing on 14 years of longitudinal data, the objective was to highlight modifiable risk factors, unmet health needs, and inequalities in ageing outcomes, and to engage policymakers and system leaders in dialogue on evidence-based solutions. The action sought to ensure that insights from Wave 6 of TILDA informed national discussions on healthy ageing, caregiving, loneliness, and health system reform.

**The Beneficiaries:** National policymakers, health system leaders, ageing-sector organisations, and older adults whose health and wellbeing depend on evidence-informed health and social care policy.

**The Activity:** The TILDA Wave 6 Report was launched in September 2025. The launch brought together policymakers, senior health system leaders, researchers, voluntary and civic organisations, and members of the public. Presentations from TILDA investigators and key partners, including the HSE, ALONE, and Family Carers Ireland, highlighted longitudinal trends in health, loneliness, caregiving, and unmet healthcare needs among older adults. A central feature of the event was the application of the internationally recognised Age-Friendly Health Systems (AFHS) 4Ms Framework; Mobility, Medications, Mind, and What Matters, using TILDA longitudinal data to demonstrate the multidimensional nature of ageing in Ireland and support translation into practice and policy.

**The Outcome:** Immediate outputs included the publication and public launch of the *TILDA Wave 6 Report: Shaping the Future – Longitudinal Trends and Opportunities for Transformation in Health and Social Care in Ireland*. The launch event generated structured dialogue between researchers, policymakers, and civic organisations, supported by presentation materials and accessible summaries of key findings. A key output was the Wave 6 chapter applying the AFHS 4Ms Framework, which demonstrated how mobility, cognitive health, medication use, and personal values interact to shape ageing outcomes.

This work directly informed national policy development and was subsequently incorporated into the HSE and Department of Health report *Delivering an Age-Friendly Health System: A Blueprint to Transform Health and Healthcare for Older Adults*.

**The Societal Impact:** This action achieved tangible policy and societal impact by directly informing national health system reform for older adults. TILDA Wave 6 findings demonstrated that many challenges associated with ageing—such as untreated hypertension, high cholesterol, chronic pain, depression, and loneliness—are modifiable rather than inevitable. By highlighting the scale of undiagnosed and under-treated conditions in later life, the research reinforced the importance of early detection, prevention, and person-centred care. Its incorporation into the HSE and Department of Health Age-Friendly Health System Blueprint supports consistent, evidence-based adoption of the 4Ms Framework across acute, rehabilitation, residential, and community settings.

**Follow up plans:** Follow-on actions will focus on deepening civic and policy engagement around the significant unmet health needs identified in TILDA Wave 6, using the AFHS 4Ms Framework to support translation into practice. TILDA will continue close collaboration with organisations such as ALONE and Family Carers Ireland to inform advocacy and service responses addressing loneliness, caregiver burden, and unmet need. Findings relating to modifiable conditions will inform targeted public and social media campaigns, developed with relevant organisations, to

promote awareness, early detection, and person-centred care. In collaboration with the HSE, TILDA is developing an online 4Ms calculation tool to support assessment and implementation of age-friendly care across healthcare settings.

These activities are underpinned by an emerging programme of peer-reviewed publications from TILDA in late 2025 and 2026, strengthening the evidence base for national healthy ageing policy.

**Further information:** [TILDA Wave 6 Report](#)



# Evaluating Ireland's Pandemic Response and Future Preparedness

## Trinity Academic:

Professor Sara Burke, Associate Professor, Dr Charlotte Myers, Research Fellow and Veronica Segerström, Researcher, Centre for Health Policy and Management.

## Civic Partner(s):

Government of Ireland COVID 19 Evaluation

**The Aim:** Leveraging Sara Burke and her team's health systems and policy expertise to inform health and social care system performance aspects of the COVID-19 panel. The evidence led evaluation of Ireland's pandemic response is funded by the Department of An Taoiseach and led by Professor Anne Scott, The aim of the Evaluation is to develop a clear systemic understanding of how the Government, its departments and agencies, managed the pandemic.

**The Beneficiaries:** The Government, policy makers, Oireachtas committees, HSE leaders and clinicians; public health and social care workforce; residents and families in long term care; patient/public advocates; researchers; and the whole Irish population affected by COVID 19 decisions.

**The Activity:** Professor Sara Burke was seconded for a day a week for nine months to the Governments COVID-19 evaluation panel as health and social care system performance expert with Dr Charlotte Myers and Veronica Segerström working as part-time researchers on the project.

As a COVID 19 panel expert, Professor Burke will contribute to the health and social care system performance aspect of a multi method, non statutory, lessons learned evaluation spanning 12–18 months, combining research, evidence synthesis, roundtables, and public consultation. Within this programme, they will: (1) interpret system performance across public health, hospitals, primary, social and community care; (2) connect international and national research (including Sláintecare implementation studies and COVID 19 response analyses) to concrete, Irish specific recommendations; and (3) help frame guiding principles for future decision making, trade offs and health system planning. Estimated direct beneficiaries include hundreds of stakeholders engaged via consultations and events, with national reach through publication of the final report. Location: Ireland, with international comparative input where relevant. Approximate timeline: Sara Burke and team (Charlotte Myers and Veronica Segerström involved in current evaluation with final report submission in August 2026.

## The Outcome

- Contribution to a comprehensive, independent COVID 19 evaluation final report
- Actionable recommendations for crisis preparedness, equitable access, workforce support, community based care and long term health system planning
- Evidence syntheses linking Irish data, submissions and comparative research
- Conceptual/implementation frameworks to guide future rapid decision making while protecting democracy and human rights
- Public facing engagements (consultations/roundtables) feeding directly into findings

**Societal Impact:** This evaluation will advance practical, equitable solutions by embedding research into national guidance – benefiting individuals (clearer access pathways), communities (strengthened primary and social care) and health system and policy leaders (policy ready frameworks). It will promote and foster system learning across the public health system, primary, hospitals, community services and long term care. Policymakers and the health/social care workforce will gain an evidence based report with recommendations for future crises, the public gains trust through inclusive consultation and clear accountability for improvements.



**What next?** The work will be presented to government and published a final independent report of the Covid 19 evaluation panel .

**Further information:** [COVID-19 Evaluation update](#)

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## Implementation Support for Alcohol and Drug Prevention

### Trinity Academic:

Dr Carlos Bruen (Assistant Professor in Health Policy & Public Health, Centre for Health Policy and Management, Discipline of Public Health and Primary Care) and Prof Allizon Metz (Adjunct Professor, School of Medicine and Professor of the Practice and Director of Implementation Practice at the School of Social Work, University of North Carolina – Chapel Hill).

### Civic Partner(s):

Health Service Executive (HSE)

**The Aim:** The primary objective was to conduct a set of key stakeholder activities to explore how drug and alcohol prevention is currently implemented in Ireland, and how it could be strengthened in the future. The intention is to support the HSE's National Needs Assessment for the Prevention of Drugs and Alcohol in Ireland.

**The Beneficiaries:** HSE's National Needs Assessment for the Prevention of Drugs and Alcohol, Regional and Local Drug and Alcohol Task Forces, Prevention workforce across early years, education/youth, and community networks/safety.

**The Activity:** This activity sought to ascertain key stakeholder perspectives of: 1) pressing needs related to mitigating the onset and progression of substance use; 2) potential evidence-based practices that can address determinants of substance use including psychological, social, economic, structural, and environment factors; 3) challenges for moving these practices into wide scale and routine use to produce population-level changes; 4) existing assets and support in communities for prevention of alcohol and drug use; and 5) implementation support and resources that could increase the likelihood practices will be used effectively and at scale.

The activity initially ran from Sep to Dec 2025, with the potential to build on this further to support the HSE's National Needs Assessment for the Prevention of Drugs and Alcohol.

Immediate Outputs:

- Stakeholder workshops to present emergent findings, validate emergent themes, and expand on findings
- Report delivered to the HSE to support their National Needs Assessment for the Prevention of Drugs and Alcohol

**Societal Impact:** The longer-term potential impact and benefit of this activity is to strengthen Ireland's national approach to drug and alcohol prevention through a clear, evidence-informed understanding of needs, assets, and opportunities across the system and produced in collaboration with the HSE as the primary knowledge end-user.

**Follow up plans:** Follow-on actions include ongoing discussion with the HSE to support their National Needs Assessment for the Prevention of Drugs and Alcohol in 2026.





## Pillar 5: Socially Responsible Education and Engagement

*“Civic engagement, at Trinity, refers to the active involvement of our students, faculty, staff, and alumni in their communities to address societal issues, promote democratic values, and foster positive social change.*

*This commitment to civic responsibility and the cultivation of associated knowledge, skills, and attitudes enriches the academic experience, delivers impactful research and scholarship, and fosters collective action for the public good”.*

Professor Jo-Hanna Ivers, Associate Dean of Civic Engagement for Societal Impact, Trinity College Dublin .

## Medical Student for a Day: Inclusive Pathways to Medicine

### Trinity Academic:

Professor Catherine Darker, Professor in Health Services Research.

### Civic Partner(s):

Conducted in collaboration with Trinity Access Programme and Secondary Schools within the Tallaght area, such as, Tallaght Community School, Old Bawn Community School, St Mark's Community School, Firhouse Community College.

**The Aim:** This initiative advances Trinity's Thrive commitment to inclusive education, widening participation, and community partnership. Embedded within the fourth-year medical rotation, it provides secondary students with authentic exposure to undergraduate medical education. In partnership with TAP, it seeks to demystify pathways into medicine and allied health, reduce social barriers, and foster a sense of belonging through structured teaching and peer engagement.

**The Beneficiaries:** Secondary school students from the Tallaght area, particularly those from under-represented backgrounds identified by TAP as being on a trajectory toward medical or allied health professional careers.

**The Activity:** Delivered four times annually since 2023, this place-based initiative is hosted at the Institute of Population Health, Tallaght. Small groups of secondary students attend live lectures on public and community health alongside medical students. A central feature is the "Buddy" model, where participants are paired with volunteer fourth-year medical students. These mentors provide informal peer guidance during breaks, offering a safe space for visiting students to ask candid questions about university life, assessments, and the social experience of medical school. The day concludes with facilitated reflection and evaluation to ensure continuous improvement.

**Immediate Outputs:** Immediate outputs include the delivery of immersive, curriculum-aligned teaching and the sustained implementation of the peer-mentoring model. The initiative strengthens formal links between the School of Medicine and local schools, embedding widening participation into routine teaching. For medical students, participation generates experiential learning in mentorship, communication, and civic responsibility. These outputs represent a practical, replicable model of civic engagement integrated within the undergraduate curriculum.

**Societal Impact:** The initiative addresses educational inequality by lowering academic and social barriers to medicine for students from under-represented communities. The Buddy model promotes transparency and trust, while the partnership with TAP ensures the programme is embedded within established progression pathways to higher education. By widening access to traditionally exclusive professional pathways, the project promotes democratic values and strengthens the relationship between the University and its local community. Ultimately, this contributes to a more diverse and socially responsive future healthcare workforce.

**Follow-up Plans:** Future development focuses on consolidating the initiative within the medical rotation while strengthening longitudinal links with TAP to support follow-up engagement. There is potential to formalise the Buddy model as a recognised student volunteering opportunity. The model is transferable to other health and social care disciplines, with ongoing evaluation providing evidence of sustained civic impact aligned with Trinity's strategic commitments.



# Inspiring the Next Generation of Biomedical Scientists

## Trinity Academic:

Dr. Gina Leisching, Research Assistant Professor, Trinity Translational Medicine Institute

## Civic Partner(s):

DEIS Schools

**The Aim:** To inspire and educate Transition Year students about careers in biomedical sciences through hands-on learning, lectures, and demonstrations. The programme aims to demonstrate to students that there is a link between classroom science and real-world medical research, in an effort to cultivate early interest in translational medicine and healthcare innovation. The Beneficiaries: Transition Year students, with a focus on including students from DEIS schools, to promote equitable access to biomedical science education.

**The Activity:** The Translational Medicine Transition Year Programme is a one-week, full-time immersive course held at TTMI from March 2–6, 2026. Activities include expert-led lectures, laboratory demonstrations, hospital tours, and hands-on experiments covering topics such as genetic variation, cancer treatment, neonatal brain injury, mental health, nanomedicine, and forensic medicine. The programme is delivered by academics

and researchers from Trinity College Dublin. Outreach efforts specifically targeted DEIS schools to ensure broad and inclusive participation.

**The Outcome:** Direct educational engagement with 20 Transition Year students. Delivery of a structured curriculum in translational medicine. Provision of certificates of participation. Creation of a network between students, researchers, and clinicians. Enhancement of TTMI's outreach portfolio and secondary school engagement framework.

**Societal Impact:** The programme promotes science literacy and healthcare career awareness among young people and aims to contribute to a pipeline of future biomedical professionals. It supports social responsibility by making high-quality science education accessible to secondary students. This programme aims to demystifying medical research, showcasing its accessibility, and encourages evidence-based thinking.

**Follow up plans:** Feedback from the 2026 cohort will inform curriculum updates.

## Bridging the Hospital Gates: NEST's Engagement with the Dublin 8 Community

### Trinity Academic:

Claire Murtagh, Stephanie Igoe, and Maria Kelly, Physiotherapy Research in Cancer Care, St James Hospital

### Civic Partner(s):

Presentation Primary School Warrenmount.

**The Aim:** The NEST project aims to deliver high-quality student placements by fostering a culture of interprofessional learning (IPL) and collaboration across diverse healthcare disciplines. By bringing together students from Medicine, Nursing, Therapy, and Engineering, the initiative seeks to embed teamwork skills early in clinical careers. Additionally, the project aims to strengthen the hospital's connection to its local Dublin 8 community, making healthcare institutions more accessible and inspiring young people to consider future careers in health and science.

**The Beneficiaries:** Healthcare students and newly qualified professionals at St. James's Hospital; clinical educators and tutors; and primary and secondary school students in the local Dublin 8 area.



**The Activity:** The NEST (Nursing, Engineering, Science, and Therapy) initiative operates as a dynamic committee within St. James's Hospital, Ireland's largest academic teaching hospital. The project facilitates structured Interprofessional Learning (IPL) sessions involving up to sixty participants, including students and staff from disciplines such as Medicine, Pharmacy, and Occupational Therapy. These sessions focus on complex case discussions where each discipline contributes a unique viewpoint to create a holistic picture of patient-centred care. A key innovation within the activity is the piloting of clinical simulation sessions for Occupational Therapy and Physiotherapy students. These simulations create a safe, controlled environment where students practice real-life clinical scenarios to refine critical thinking and problem-solving skills.

Furthermore, NEST engages in community outreach, such as the "Science Fair" hosted at Presentation Primary School Warrenmount during Science Week. This event allowed healthcare professionals to showcase their work to local children through interactive demonstrations, fostering a sense of familiarity and trust between the community and the hospital.

**Immediate Outputs and Outcomes:** The primary outputs of the NEST initiative include the establishment of a robust interprofessional support network that enhances the quality of clinical placements at SJH. Tangible results include the delivery of large-scale IPL workshops and the successful pilot of clinical simulation modules that bridge the gap between theory and

practice. The Science Week fair resulted in direct engagement with hundreds of primary school students, while the feedback loops established with patients have provided valuable data to refine the educational experience. Additionally, the project has fostered smaller, informal connections that lead to more spontaneous collaboration across hospital departments.

**Societal Impact:** NEST exemplifies the School of Medicine's commitment to socially responsible education by ensuring that teamwork and mutual respect are embedded in clinical practice before students qualify. By breaking down professional silos, the project improves communication and teamwork, which ultimately leads to enhanced patient care and safety.

The initiative also drives social change by humanising healthcare institutions for local communities. The Science Week fair and school visits build rapport with young people who might otherwise feel disconnected from a large hospital, promoting healthcare careers and making health institutions seem less enigmatic. By focusing on intergenerational engagement, NEST helps ensure that the academic health campus serves as a centre for both learning and community innovation.

**Follow up plans:** Building on the success of the primary school fair, NEST plans to expand its outreach to local secondary schools during 'College Aware Week'. These future visits will focus on promoting diverse healthcare careers and fostering deeper collaboration between the education and healthcare sectors.

## Wired without Wires: The electrical messaging within you

### Trinity Academic:

Ms Lena Doherty Faculty Administrator Faculty of Health Sciences, Prabhav Mehra, PhD Student

### Civic Partner(s):

Academic Primary Care Collaborative (APCC) in collaboration with Trinity Access Programme and Secondary Schools within the Tallaght area.

**The Aim:** This annual outreach event is part of the Health Sciences participation in European Researchers Night. The overarching aim is to spark curiosity among this underserved community and promote informed exploration of a range of Health Sciences research topics. In 2026 Wired Without Wires was introduced to the programme. Through accessible explanations, the objective was to highlight the significance of applied neuroscience and its core domains. The session sought to inspire early interest in biomedical research and demonstrate the real-world impact of technologies such as electrophysiology and biosignal analysis. The Beneficiaries: This was targeted to transition year (TY) students across 5 schools in Tallaght.



**The Beneficiaries:** This was targeted to transition year (TY) students across 5 schools in Tallaght.

**The activity:** Treplace with: This session consisted of a 15-minute lecture delivered as part of a broader public engagement session for TY students. The event took place in the Institute of Population Health, Tallaght on the 10th of October 2025, where 100 TY students from five schools participated.

As the representative of applied neuroscience, Prabhav Mehra, PhD Student, introduced students to clinical electrophysiology, demonstrating how electrical signals generated by the nervous system and muscles can reveal physiological processes that are otherwise invisible in routine clinical assessments.

The demonstration highlighted how these biosignal based markers of impairment hold potential to transform the diagnosis, monitoring, and understanding of progressive neurodegenerative conditions such as ALS and MS.

**Immediate Outputs:** A feature about the organised engagement effort for TY students was published in the Tallaght Echo, which publicly showcased the initiative and its contributions. The students and their teachers reported that the session offered valuable insights into a wide range of health sciences topics and was a highlight engagement event for them. The event also facilitated firsthand interaction with university staff and facilities. This media coverage, combined with participant feedback, strengthened the profile of Trinity's outreach efforts and enhanced recognition of the institution's commitment to community engagement, particularly within an underrepresented region.

**Societal Impact:** A feature about this event was published in the Tallaght Echo, which showcased the initiative and its contributions. The students and their teachers reported that the session offered valuable insights into a wide range of health sciences topics and was a highlight engagement event for them. The event also facilitated firsthand interaction with university staff and facilities. This media coverage, combined with participant feedback, strengthened the profile of Trinity's outreach efforts and enhanced recognition of the Academic Primary Care

Collaborative's (APCC) commitment to innovate community health in Tallaght.

**Follow up plans:** This public engagement effort has had a profound effect on Prabhav and has instilled in him a passion for public engagement activities. Since his involvement, Prabhav believes it is his duty to spread awareness and inform the public about his research. His future plans are to maintain a consistent presence in outreach, strengthen public understanding of neuroscience and clinical research, and help build access to scientific information



## Soapbox Science Dublin 2026

### Trinity Academic:

Dr. Julia O’Sullivan, Research Fellow, Trinity Inst. of Neurosciences (TCIN) Research Fellow, Discipline of Physiology

### Civic Partner(s):

Soapbox Science, UCD, Department of Agriculture Food and Marine.



**The Aim:** Soapbox Science Dublin 2026 is a live event that brings female and non-binary scientists and engineers into public spaces on soapboxes, to talk to the public about their research. It has two aims: to engage members of the public who may not have set out to interact with science or scientists, and to promote the visibility of women in science. Since 2011 thousands of speakers have participated in Soapbox Science events across the world, from eminent leaders in their field to those starting their careers in STEMM (e.g. PhD students).

**The Beneficiaries:** General Public and Scientific Community.

**The Activity:** Soapbox Science is a novel public outreach platform for promoting women and non-binary scientists and the science they do. Our events transform public areas into an arena for public learning and scientific debate. This year’s Dublin event will be taking place on the 20th of June at the Grafton Hotel.

**Immediate Outputs:** Providing scientist and engineers an opportunity to present their work and to engage in a PPI activity. The human impacts of the network we initiated, and illustrates how public engagement has the potential to make a difference to scientists’ careers not only by raising their profile and widening the reach of their work, but also by extending their professional networks and improving their communication skills.

**Societal Impact:** This event similar to [pint of science](#) and [culture night](#) helps in disseminating Irish research to the general public, with a focus on the research being conducted by women and non-binary people. More than 2,700 women and non-binary people in science worldwide have stepped onto our soapboxes since we decided we needed to do something to address stereotypes and biases in Science, Technology, Engineering, Mathematics and Medicine (STEMM). We hope that many more women and non-binary scientists will be tempted to share their passion for their work with the general public in unexpected places, challenging perceptions of who scientists are, providing role models and helping to create a world where any young person – no matter their background, gender or race – can see themselves advancing knowledge and pushing the frontiers of what we understand about our world.

**Follow up plans:** Following an exceptional flood of applications, speakers have been selected from across a wide range of faculties, including an applicant from the Trinity School of Medicine. Social media and traditional advertising will commence, along with logistical organisation for the event itself. We are very excited for this in-person event and hope to see many of you there.



## A 'HAPPY' programme for teenagers with Down Syndrome

### Trinity Academic:

Professor Eleanor Molloy, Chair of Paediatrics & Child Health and Beth Corcoran, MSc Student.

### Civic Partner(s):

The Down Syndrome Centre

**The Aim:** The objective of the HAPPY programme is to inform and educate young teens with Down Syndrome about current aspects of health research and to give them the language and learning tools to help maintain their own health and to self-advocate in terms of management of their health.

The programme was devised in collaboration with DISCO partner, The Down Syndrome Centre. This initial iteration was run as a pilot programme, and the DISCO team conducted a Quality Improvement Initiative to assess its effectiveness. This QI initiative will help improve future iterations of the programme.

**The Beneficiaries:** This initiative is aimed at young teens (age 12-14) with Down Syndrome. The programme will see Trinity researchers engage with a cohort of society that can be marginalised from the world research.

**The Activity:** A pilot iteration of the HAPPY Programme was delivered to teenagers during the months of May and June 2025. The Down Syndrome Centre facilitated delivery of the 6-week programme at their centre. Participants were recruited from the centre's network of families.

A Quality Improvement Initiative which included modified questionnaires for teens, parental questionnaires, and researcher feedback assessed the efficacy of workshop format, content and teaching materials. This will help improve the programme, ensure it is meeting participants needs, and make it scalable so that it can be delivered in other centres and other regions. The programme was very well received by teens, parents, staff at the Down Syndrome Centre, and Trinity researchers.

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**The Outcome:** The pilot programme was very well received by all involved and it has resulted in an excellent working relationship between Trinity's DISCO team and The Down Syndrome Centre. The intention is to make the HAPPY Programme available as an educational module that can be run in other centres and regions. Beth Corcoran has presented the HAPPY programme at the following events:

1. HSE PPP Conference, Croke Park, Dublin 1, 17th Sept 2025 (Poster Presentation)
2. Hub21, Monaghan as part of the Cavan Monaghan Science Festival 2025 (oral presentation)
3. Trinity21 – The TCD Down Syndrome Research Network launch event, 25th Nov 2025 (oral presentation)

**Follow up plans:** The HAPPY Programme forms part of an MSc in Paediatric Research which is looking at initiatives to support independence in people with Down Syndrome through dissemination of the latest research advances in the field of Down Syndrome and to foster autonomy in people with Down Syndrome through public and patient involvement in Down Syndrome research.

The DISCO team is currently seeking funding to run a second and improved iteration of the programme next May and June at the Down Syndrome Centre. A publication that will detail the logistics of the pilot programme is currently being drafted.



## Empowering Patient, Family and Carer Involvement in Drug-Reimbursement Decision Processes.

### Trinity Academic (s):

Dr Laura McCullagh, Chief I Pharmacist & Head of Research, NCPE and Clinical Senior Lecturer, Trinity College Dublin

### Civic Partner(s):

Ms Joan O'Callaghan, Dr Lesley Tilson, Dr Roisin Adams, National Centre for Pharmacoeconomics (NCPE), Ireland.

**The Aim:** This initiative aims to empower patients, families, and carers to engage actively in health-payer drug-reimbursement decision-making. By providing educational programmes, webinars, and one-to-one support, the action ensures the unique lived experiences of the patient community are systematically considered by health-payers during the drug-reimbursement process.

**The Beneficiaries:** The primary beneficiaries are a national population of patients, their families, and carers, alongside members and representatives of Patient Organisations throughout Ireland.

**The Activity:** In 2018, the National Centre for Pharmacoeconomics (NCPE) established a formal National Patient Organisation Submission Process. This framework allows the patient voice to be integrated into the evidence considered by the Health Service Executive (HSE) during reimbursement decisions. The NCPE aims to identify Patient Organisations for every drug undergoing a full health-technology assessment (HTA) and provides dedicated on-to-one support through the NCPE PPI Lead.

Education is a core component of the activity. Since 2018, an annual 12-week hybrid HTA module has been delivered in collaboration with IPPOSI, training approximately 40 participants annually through face-to-face sessions and online teaching. Furthermore, an annual educational webinar launched in 2024, is offered to patients, families, carers and patient groups. Approximately 35 Patient Organisations are represented each year.

**Immediate Outcomes:** Lived experiences are now clearly visible in the reimbursement process; HSE Drugs Group meeting minutes frequently reference key points from Patient Organisation submissions. Analysis confirms that uptake of the submission process is increasing over time. Research regarding this progress



IPPOSI is a patient-led organisation that works with patients, government, industry, science and academia to put patients at the heart of health policy and innovation

has been presented at international conferences, including the HTAi Annual Meeting in Seville (2024) and ISPOR Europe in Barcelona (2024) and Glasgow (2025). The HTA module has empowered the patient community, while online webinars have significantly boosted the confidence of representatives to make submissions.

**Follow up plans:** Future efforts will prioritise fostering relationships with all Patient Organisations particularly groups representing those affected by cancer, as Patient Organisation submissions for cancer drugs have been historically lower than for non-cancer drugs.

# Health Policy Highlights Informed by Trinity School of Medicine

## Policy Highlights - Health Equity, Migration, and Social Justice



### Homelessness in Ireland and European Union policy context

Trinity Cited Authors Siersbaek, R., Ford, J., Ní Cheallaigh, C., Thomas, S. and Burke, S

Policy Source European Social Policy Analysis Network (ESPAN)

Policy Document [The fight against homelessness and its links with anti-poverty policies in Ireland 2025](#)



### Asylum and Migration

Trinity Authors Felicity Daly

Policy Source ESRI Survey and Statistical Report Series

Policy Document [Asylum and Migration Overview 2024: Ireland](#)



### Health of People in Prison and on Probation

Trinity Authors Rose Anne Kenny and Triona McNicholas

Policy Source UK Department of Health & Social Care

Policy Document [The health of people in prison, on probation and in the secure NHS estate in England 2025](#)



### Reduction of mental health-related stigma and discrimination

Trinity Authors Katie Cremin, Michelle Spirtos, Olive Healy and Sarah Quinn

Policy Source World Bank

Policy Document [Reduction of Mental Health Related Stigma and Discrimination: Global Overview 2024](#)



### Importance of social connection for health and resilience

Trinity Authors Arianna Almirall, Sánchez, Brian Lawlor, Carol Rogan, Dawn Higgins, Emilia Grycuk, Iracema Leroi, Irina Kinchin, Miriam Galvin and Yaohua Chen

Policy Source World Health Organisation

Policy Document [From loneliness to social connection: charting a path to healthier societies: report of the WHO Commission on Social Connection 2025](#)



### COVID-19 pandemic and health inequalities in Ireland

Trinity Authors Anne Nolan, Catherine Darker, Emma Burke, Gail Nicolson, Joseph Barry, Lina Zgaga, Luke Mather and Nicola O’Connell.

Policy Source The Economic and Social Research Institute (ESRI)

Policy Document [COVID-19 infection rates and social disadvantage in Ireland: An area-level analysis 2024](#)

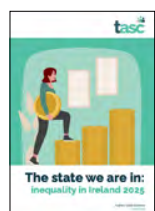


### Social isolation and loneliness in Christian communities

Trinity Authors Brian Lawlor and Iracema Leroi

Policy Source Cardus

Policy Document [Social isolation and loneliness in Christian communities 2025](#)



### Inequality in Ireland

Trinity Authors Ann Hever, Christine McGarrigle, Gráinne Loughran, M.D. Ward, Paul O’Mahoney, Rose Anne Kenny and Seán Moynihan

Policy Source Think Tank for Action on Social Change (TASC)

Policy Document [The State We Are In - Inequality in Ireland 2025](#)



### Assessment of gender and immunization in Ghana

Trinity Authors Catherine Darker  
Policy Source UNICEF  
Policy Document Gender and Immunization in Ghana 2025



### Drug policing in the 21st century

Trinity Authors Bobby P. Smyth, Catherine Darker, Joe Barry, Jo-Hanna Ivers and Lina Zgaga  
Policy Source Manhattan Institute  
Policy Document Drug Policing in the 21st Century Concepts and Strategies for Policing the New Drug Crisis

## Policy Highlights- Planetary Health and Global Resilience



### Adverse Weather and Health Planning

Trinity Authors Matthew Chersich  
Policy Source Public Health Scotland  
Policy Document Adverse weather and health plan IIA scoping exercise 2025



### Addressing extreme heat as a global health challenge

Trinity Authors Matthew Chersich  
Policy Source The South African Medical Research Council  
Policy Document Heat-Related Health Risks and Responses of G20 Countries



### Effects of high ambient temperature on congenital disorders in Mexico

Trinity Authors      Matthew Chersich  
 Policy Source      Inter-American Development Bank  
 Policy Document    Climatic Shocks, Indigenous Health, and Congenital Disorders: Evidence from Mexico 2025



### Building a Heat Resilience Roadmap for the Gulf Region

Trinity Authors      Matthew Chersich  
 Policy Source      Observer Research Foundation  
 Policy Document    Building A Heat Resilience Roadmap for the Gulf Region 2026

## Policy Highlights - Health System Infrastructure, Economics, and Fiscal Policy



### Evaluation of Ireland's Sugar-Sweetened Drinks Tax (SSDT)

Trinity Authors      Barrett, E. M., Wyse, J., Forde, C.  
 Policy Source      Department of Health; Healthy Ireland  
 Policy Document    Minister for Health publishes Evaluation of the Sugar-Sweetened Drinks Tax



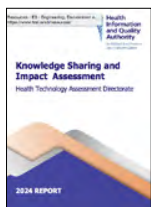
### Mental Health Reform and Budget 2025

Trinity Authors      M.D. Ward, Robert Briggs and Rose Anne Kenny  
 Policy Source      Department of Finance  
 Policy Document    Pre-Budget Submissions 2025



### Healthcare Resource Allocation in Ireland

Trinity Authors Conal Cunningham, Kevin McCarroll and Miriam Casey  
Policy Source Economic and Social Research Institute (ESRI)  
Policy Document [AN ANALYSIS OF POPULATION-BASED RESOURCE ALLOCATION FOR HEALTH AND SOCIAL CARE IN IRELAND](#)



### Health Technology Assessment (HTA) and Quality in Services

Trinity Authors Máirín Ryan and Susan M. Smith  
Policy Source Health Information and Quality Authority  
Policy Document [2024 Health Technology Assessment Directorate Knowledge Sharing and Impact Assessment report](#)



### Mental Health Research Funding

Trinity Authors Dr Louise Brennan (Trinity College Dublin) & Professor David Robinson (St James's Hospital Dublin)  
Policy Source Department of Health  
Policy Document [Minister for Mental Health Mary Butler announces €3 million investment in mental health research](#)



### Impact of COVID-19 pandemic on European societies

Trinity Authors A DiCosimo, Amanda Lavan, Conal Cunningham, David Robinson, Kevin McCarroll, M.D. Ward, Robert Briggs, Róisín Purcell, Román Romero-Ortuño, Rory Nee, Rosaleen Lannon and Rose Anne Kenny  
Policy Source Publications Office of the European Union  
Policy Document [Work and well-being during the COVID-19 pandemic](#)



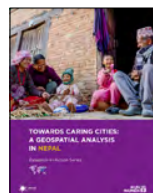
### EU Cardiovascular Health Plan:

Trinity Authors Susan M Smith  
 Policy Source Council of the European Union  
 Policy Document Communication on an EU cardiovascular health plan: the Safe Hearts Plan



### Evaluation of the EU Action Plan on Childhood Obesity

Trinity Authors Susan M Smith  
 Policy Source Publications Office of the European Union  
 Policy Document Study on the evaluation of the EU action plan on childhood obesity. Annex V, VI, VII, VIII, X, XI



### Establishing international standards for the health workforce

Trinity Authors Desmond O'Neill  
 Policy Source Data Pop Alliance  
 Policy Document Towards Caring Cities: A Geospatial Analysis in Nepal 2025

## Policy Highlights - Service Delivery, Chronic Care Management, and the Life Course



### Life Course Approach to Health and Well-being

Trinity Authors Arthur White, Belinda Hernández, Cathal McCrory, Richard B. Reilly and Rose Anne Kenny  
 Policy Source World Health Organisation (WHO)  
 Policy Document Framework to implement a life course approach in practice



### **Integrated Care for Older People**

Trinity Authors Céline De Looze, Joanne Feeney and Rose Anne Kenny  
Policy Source World Health Organisation (WHO)  
Policy Document **Manuel sur les soins intégrés pour les personnes âgées : guide pour l'évaluation et les parcours centrés sur la personne en soins primaires, 2e éd.**



### **Demand for Long-Term Residential Care and Home Support Services**

Trinity Authors Aisling O'Halloran, Céline De Looze, Christine McGarrigle, M.D. Ward, Rose Anne Kenny  
Policy Source Economic and Social Research Institute (ESRI)  
Policy Document **Projections of regional demand and bed capacity requirements for older people's care in Ireland, 2022-2040: Based on the Hippocrates model**



### **Moving Care from Hospitals to Community Settings**

Trinity Authors Stephen Thomas  
Policy Source Nuffield Trust UK  
Policy Document **From hospital to community: International lessons on moving care closer to home**



### **Disconnect Between Health Policy and Social Care**

Trinity Authors Charles Normand, Conor Keegan, Sarah Barry and Stephen Thomas  
Policy Source Think Tank for Action on Social Change (TASC)  
Policy Document **Morale among Health and Social Care Workers 2026**

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### **Mental Health Needs of People Living with Diabetes**

Trinity Authors      Frédérique Vallières, Philip Hyland, Belinda Hernández and Rose Anne Kenny.  
Policy Source        PublicPolicy.ie  
Policy Document    [Addressing the mental health needs of people living with diabetes in Ireland](#)



### **Mental Health Challenges During COVID-19**

Trinity Authors      Agnès Higgins, Caoimhe Fenton, Conan Brady, Declan M. McLoughlin, Iracema Leroi, Martina Hennessy and Orlaith Loughran.  
Policy Source        Publications Office of the European Union  
Policy Document    [Mental health challenges in the EU health and social care sector during COVID-19](#)



### **Non-Fatal Overdose in Ireland**

Trinity Authors      Professor Jo-Hanna Ivers, School of Medicine, Trinity College Dublin  
Policy Source        Department of Health  
Policy Document    [Minister Murnane O'Connor launches new study of non-fatal drug overdose](#)



## Our Health Policy & Civic Engagement Champions

This report features details of a wide and diverse range of Public, Civic and Community partners who Trinity College Researchers are collaborating with to advance Civic Engagement and Societal Impact. These partners include:

### Civic & Voluntary Organisations

- AkiDwA
- ALONE
- An Cosán
- Colin Neighbourhood Partnership
- Cork Simon
- Crosscare
- Deep End Ireland
- Depaul Ireland
- Diabetes Ireland
- Endo Ireland
- EPIC (Empowering People in Care)
- Family Carers Ireland
- Fatima Centre
- Focus Ireland
- Good Shepherd Cork
- Grangegorman Development Agency (GDA)
- HAIL Housing Support
- HIV Ireland
- The Irish Platform for Patient Organisations, Science and Industry (IPPOSI)

- MASI (Movement of Asylum Seekers in Ireland)
- Merchants Quay Ireland
- Migrant Health Alliance Ireland
- Peter McVerry Trust
- Robert Emmet Community Development Project
- Safetynet Primary Care
- Salvation Army
- Sexual Health Centre (Cork)
- Shankill Children and Young People Zone
- Tallaght Childhood Development Initiative (CDI)
- Tallaght Library
- TENI (Transgender Equality Network Ireland)
- The Down Syndrome Centre
- The Queen's Innovation Zones
- UISCE
- Volunteer Ireland

### Arts & Cultural Organisations

- Alex Kornhuber (independent artist)
- Arts Council of Ireland
- Bealtaine festival
- Cathy Fowley (independent artist)
- Creative Aging International
- Creative Ireland
- Creative Life Hub at Mercer's Institute for Successful Ageing
- Dublin International Film Festival (Picture House)
- Irish Hospice Foundation
- Irish Museum of Modern Art
- Jameel Arts and Health Lab
- National Archives, Ireland (NAI)
- Réalta
- SoloSIRENs
- Soapbox Science
- The Abbey Theatre

### Academic & Clinical Partners

- Academic Primary Care Collaborative (APCC)
- Children's Health Ireland, Tallaght
- Dublin City University (DCU)
- ENCHE (European Network of Climate Health Educators)
- Global Brain Health Institute
- Institute of Medicine
- Merrion Fertility Clinic
- National College of Art & Design
- National Maternity Hospital
- Novo Nordisk
- Rotunda Maternity Hospital
- Royal College of Physicians of Ireland (RCPI)
- Royal Irish Academy
- St James' Hospital
- Tallaght University Hospital
- Technological University Dublin
- Trinity Access Programme
- Trinity College Institute of Neuroscience
- Trinity Translational Medicine Institute
- Trinity's School of Creative Arts
- UCD

### Government and Non-Government Organisations

- Atlantic Institute
- Centre for Excellence in Universal Design
- Department of Culture, Communications and Sport
- Department of Health
- Department of Transport
- Dublin City Council
- Environmental Protection Agency (EPA)
- European Observatory on Health Systems and Policies
- European Union of Medical Specialists – Geriatric Medicine Section (UEMS-GMS)
- Government of Ireland COVID 19 Evaluation
- Health Intelligence Unit
- Health Pathways
- Health Research Board
- Health Service Executive (HSE)
- HSE Community Healthcare East
- HSE Healthy Ireland
- HSE National Doctors Training and Planning (HSE-NDTP)
- HSE National Forensic Mental Health Service (NFMHS)

- HSE Programme for the Homeless
- HSE Regional Health Area Implementation
- Irish Court Service
- Irish Prison Service (IPS)
- Irish Wheelchair Association
- National Centre for Pharmacoeconomics (NCPE)
- National Disability Authority
- National Office for Traffic Medicine
- Oireachtas Committee on Health
- Respond Housing Association
- The WayFinding Centre
- Vision Ireland
- World Health Organisation

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## Production and Editorial Acknowledgements

### Academic Lead – Professor Susan Smith

Susan Smith, Professor of General Practice at Trinity College Dublin is the Academic Lead of the Health Policy and Civic Engagement Report 2026. Susan works as a General Practitioner at Inchicore Family Doctors in Dublin 8. She did her undergraduate medical degree in Trinity College Dublin and then did GP training in Ireland and the UK, followed by a period working as an academic GP in Australia. She returned to Ireland where she has worked as an academic GP in UCD, RCSI and TCD and continues to work as a GP at Inchicore Family Doctors in Dublin 8. Professor Smith is the Associate Director of the HRB Primary Care Clinical Trials Network Ireland and the Clinical Lead for HRB CICER, which provides evidence synthesis supports for the National Clinical Effectiveness Committee. She is currently the PI for a national cluster RCT examining two interventions for people with multimorbidity and is PI on a HRB Evidence for Policy Award exploring community-based exercise programmes for stroke survivors. She is one of the coordinators of the Deep End Ireland group of GPs working in disadvantaged communities.

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### Report Production & Analysis – Bridget Gavin

Bridget Gavin is Research Impact Officer, School of Medicine, Trinity College Dublin and is responsible for the production and coordination of this comprehensive publication.

In her role, she manages the synthesis and presentation of a diverse range of civic engagement activities and policy highlights across the School's 21 disciplines. Her work showcases how School of Medicine, Trinity College Dublin leverages its expertise and resources to deliver societal benefits and address public health challenges through five strategic pillars: health equity, creative engagement, planetary health, evidence-based policy, and socially responsible education.

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