Author’s response to reviews

Title: Evaluating the acceptability of a co-produced and co-delivered mental health public engagement festival: Mental Health Matters, Jakarta, Indonesia

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Author’s response to reviews:

Sophie Staniszewska
Richard Stephens
Editors in Chief
Research Involvement and Engagement
Dear Editors

RE: Evaluating the acceptability of a co-produced and co-delivered mental health public engagement festival: Mental Health Matters, Jakarta, Indonesia

Thank you for your email dated 14th June 2019 and additional reviewer comments. I have detailed below how we have addressed each point within the feedback. We feel these revisions have strengthened the paper greatly and would like to thank the reviewers again for the time they have taken to assess the manuscript.

Reviewer #1:

The PSP is a valuable part of this paper but currently it is not mentioned in the Plain English Summary or Abstract. The Methodological detail on the PSP is still rather light.

Thank you for highlighting this. We have now included detail on the research prioritisation exercise in both the plain English summary and the abstract. We have also added extra detail on the methodology of the research prioritisation exercise (copied below):

On the third day of the festival, 87 service users, carers, academics and professionals engaged in a research prioritisation exercise to collaboratively identify future mental health research priorities for Indonesia. The approach was informed by the Guidance for Priority Setting Partnerships (15) and the Checklist for Health Research Priority Setting: Nine Common Themes of Good Practice (16).

Preparatory work was undertaken by the organising committee, made up of service users, carers, academics and health professions, who were responsible for the priority setting exercise (15). They decided on the resources available, who should be invited and the approach to be undertaken. The organising committee invited relevant stakeholders to ensure balanced representation from service users, carers, academics and health professionals utilising existing networks.

The research prioritisation exercise was introduced by the organising committee along with the methods to be undertaken, the expected outcomes and who would take forward identified priorities to ensure transparency of process (15). Attendees split themselves into 10 groups which each included a mix of different stakeholders.

Stage 1: Groups were given 90 minutes to discuss their thoughts and generate ideas for research priorities related to future mental health in Indonesia. There was no limit on the scope or number
of research priorities that groups could identify. Attendees were asked to write identified priorities on flip chart paper for audit trail purposes (15). Members or the organising committee were available during the whole process should attendees have questions or queries relating to the process.

Stage 2: To reduce the list of identified priorities to a shorter list to be voted on by all attendees, each group then had 30 minutes to discuss identified priorities and select one of their generated ideas to take forward. Consensus was required amongst the whole group in order for a priority to be taken forward to stage 3.

Stage 3: The 11 identified research priorities (one additional priority was identified as the groups fed back) were compiled onto flip chart paper and presented to all attendees. The group agreed that identified priorities were different enough from each other to stand alone for stage 4 voting.

Stage 4: Each group were allocated 2 votes which they could use on any of the identified research priorities to determine three priorities within the set of 11. Groups had 30 minutes to discuss and reach consensus on this. A nominated member from each group was then given a marker pen to indicate the group’s votes by placing ticks next to the two chosen priorities. A member of the organising committee oversaw this process to ensure each group only cast two votes.

Stage 5: Scores were calculated for each priority and the three research areas considered to be of greatest priority in by the group as a whole were announced. The organising committee reiterated their responsibility for taking these forward by publishing and developing research proposals accordingly before the exercise closed.

We would welcome some reflection on whether carrying out a PSP in the context of a film festival may have influenced the outcome of the PSP as this will be helpful to other researchers.

The festival was a 6-day mental health festival comprising 18 events including public lectures, film screenings, arts activities, exercise classes and panel discussions. Whilst films were included in the schedule of events, these were just part of the festival and not the focus. We have however, added a paragraph in the discussion about the value of undertaking the research prioritisation exercise within the context of a mental health festival which we hope will address the reviewer’s helpful comment:

The research prioritisation exercise, which successfully engaged 87 service users, carers, academics and health professionals, collaboratively identified 11 mental health priorities for Indonesia whilst also reaching consensus on the three research areas considered to be of most importance; improving employment opportunities for people with mental health problems, health promotion through information provision and campaigning to reduce the stigma related to mental health problems and increased mental health literacy of children and young adolescents. The prioritisation exercise appeared to work particularly well in the context of the wider mental
health festival. This may have been a result of the benefits people reported of attending the festival more generally (e.g. increased understanding of mental health issues and the propensity for increased engagement in mental health research) which is likely to be relevant to people tasked with planning similar events. Future prioritisation exercises could also consider promoting engagement from a wider audience through the use of Twitter and online surveys (19).

A reference for how the content analysis was carried out would be welcome.

Thank you for highlighting this. We have added two references; one for the content analysis description and one for it’s application to unstructured survey responses.

Should you require any further information, please do not hesitate to contact me.

Kind regards

Helen Brooks
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