

## PhD Studentship: Tackling loneliness in schools using social prescribing (TaLoS)

Duration of Studentship	3 years
Stipend amount	£20,622
Studentship title	Tackling loneliness in schools using social prescribing (TaLoS)
University fees (if not included in the stipend)	University fees included

### About us

A 3-year PhD Studentship is available in the Social Biobehavioural Research Group, Institute of Epidemiology and Healthcare at UCL as part of a wider project exploring the application of social prescribing in schools to tackle loneliness. The studentship will commence from September 2024, under the supervision of Dr Daniel Hayes and Professor Daisy Fancourt.

**Project Title:** Tackling loneliness in schools using social prescribing (TaLoS)

### Background

Social prescribing is a mechanism of care used since the 1980s in the UK and was formally launched as a national programme by NHS England in 2018 to link patients with non-medical forms of support within the community. This process usually involves a health or social care professional referring a patient to a Social Prescriber, sometimes known as a Link Worker (LW), who develops a non-clinical plan that connects the patient with community organisations to improve health, wellbeing or other aspects of the patient's life. Activities include the arts, cultural events, and other support services, such as physical activity, financial support, volunteering and befriending.

Recent reviews into the impact of social prescribing for loneliness suggests evidence of promise and that both patients and service providers believe it to be helpful (Bickerdike et al., 2017). However, these are limited to adult populations and studies often lacked control groups. When control groups are utilised, results suggest that social prescribing is beneficial. In one UK social prescribing service for individuals who were lonely, findings demonstrated that 37% of those who received social prescribing were classified as 'not lonely' at 3 month follow up, compared with 20% of those in the matched control group (Foster et al., 2021). There was also evidence to suggest that younger age groups benefitted more. Whilst the evidence for youth social prescribing is less developed, a recent review concluded that there was promise of the benefits of it for loneliness, but that methodological concerns, including a

small number of participants, meant robust conclusions could not be drawn (Hayes, 2022). Accordingly, there is a critical need for robust research that can provide evidence into the effectiveness on youth social prescribing for those that report loneliness.

Social prescribing is supposed to be an ‘all age’ model, yet research suggests that uptake from YP remains lower than for adults. YP see the benefits of social prescribing, however, its dominant model in the UK, through family doctors, may be inhibiting youth involvement, as they do not feel comfortable accessing wellbeing support this way (Young Minds, 2021). Schools are well placed to deliver targeted interventions for loneliness, as they are viewed as a universal point of access for YP, offering an important opportunity to embed well-being initiatives (Aviles et al., 2006). They are an ideal place to set social prescribing and have started to be used as a venue to facilitate it. However, educational stakeholders have been underrepresented in social prescribing service development and more needs to be undertaken to ensure adequate information sharing between agencies, such as schools and LWs (Polley et al, 2023). To date, no studies have explored social prescribing in school settings. Thus, the aim of TaLoS is to develop and evaluate social prescribing pathways via schools for young people who are lonely.

### TaLoS

TaLoS is national programme of work aiming to develop, and test, a social prescribing pathway in schools to tackle loneliness. It is a collaboration between University College London, the University of Manchester, the National Academy for Social Prescribing and the Social Prescribing Youth Network. The overarching programme will be split into three phases, as follows:

**Phase 1 (March 24 - August 24)** will involve working with schools, educational professionals, social prescribers, and young people to develop a social prescribing pathway.

**Phase 2 (Sep 24 – August 25)** will involve piloting the pathway with 12 primary and secondary schools across 3 cities in England, as well as testing the evaluation framework. Around 600 pupils will self-complete measures to screen for loneliness and approximately 100 pupils who are lonely will be randomised to receive social prescribing or signposting. Questionnaires will follow young people up at 3 and 6 months.

Construct	Measure type	Indictive YP candidate measure
Loneliness	Outcome (primary)	ONS item
Emotional & behavioural difficulties	Outcome (secondary)	Me&MyFeelings
Wellbeing	Outcome (secondary)	Huebner Life Satisfaction Scale
Community connection	Mechanism	Student Resilience Survey
Empowerment	Mechanism	Youth Efficacy / Empowerment Scale-Mental Health

Sociodemographic information	Moderator	Developed by research team
Service use	Moderator and economic (secondary)	Short Client Service of Receipt Inventory (CSRI)
Help seeking intentions	Moderator	General help seeking questionnaire
School climate	Moderator	School Climate Questionnaire

Using theories and methods from Implementation Science, interviews with school staff, link workers and young people will explore the feasibility, acceptability and suitability of the social prescribing pathway, as well as any barriers and facilitators to pathway implementation and delivery.

**Phase 3 (Sept 25 – Oct 27)** will aim to evaluate the clinical effectiveness of social prescribing in schools to improve loneliness, as well as explore estimate costs and benefits of SP with an economic evaluation. The full trial will involve 30 schools across three cities, with around 3,300 pupils being screened and 330 young people being randomised to social prescribing or signposting and followed up at 3, 6 and 12 months to explore the pathways impact on loneliness (primary outcome) and mental health/wellbeing (secondary outcomes). Interviews will explore perception and experiences of social prescribers, school staff and young people on engaging with the pathway, and how it impacted loneliness.

### The PhD project

We are seeking a talented and enthusiastic student to contribute to this programme of work, contributing to the overall research design, engaging young people with social prescribing, as well as developing their own proposed doctoral studies to fit alongside TaLoS. There is flexibility in how the candidate wishes to do this. For example, the PhD could focus specifically on a specific population who will be captured as part of the larger programme of work (e.g. young people in schools who are from more socially deprived backgrounds). Or the PhD could focus on a particular outcome that may already be included within TaLoS or could be added in (e.g. exploring how social prescribing affects confidence in young people recruited into the study through quantitative data analysis). Or the PhD could explore additional mechanisms relating to social prescribing and/or loneliness (e.g. through conducting additional qualitative interviews). The PhD therefore provides an opportunity to pursue an individual interest while benefitting from the wider structure, resources and expertise of a large-scale trial.

### The environment

The student will work within the Institute of Epidemiology and Healthcare – specifically in the Social Biobehavioural Research Group led by Professor Daisy Fancourt, which focuses on the effect of social connections and behaviours on health. This includes social deficits (e.g.

loneliness, isolation and COVID-19 lockdowns) and social assets (e.g. social connections, cultural and community engagement, nature engagement and social prescribing). The group explores (i) the effects of social factors on health outcomes, (ii) the psychological, biological, social & behavioural mechanisms underlying these effects, (iii) the modifying role of micro-, meso- and macro-level factors on effects, and (iv) differential patterns, barriers and enablers of social behaviours amongst different groups.

The research group involves over 20 postdoctoral researchers, coordinators and PhD students and works in partnership with over 400 community and third sector organisations, several government departments, the NHS, public health bodies across the UK, the World Health Organisation, UK Arts Councils, leading health charities, and patient and public groups. The research group is also designated a World Health Organisation Collaborating Centre.

The student will benefit from the in-house methods training programme run by the Social Biobehavioural Research Group as well as wider expertise and support within the team. This Studentship presents a unique opportunity to conduct supervised research at and be a part of the research community, being an integral part of the exciting and thriving research team.

### **Ethics Approval**

UCL ethics approval will be sought by Dr Daniel Hayes, though an amendment may be needed, depending on the successful applicants' scope of work.

### **References**

Aviles AM, Anderson TR, Davila ER. Child and Adolescent Social-Emotional Development Within the Context of School. *Child Adolesc Ment Health* 2006; 11: 32–9.

Bickerdike L, Booth A, Wilson PM, Farley K, Wright K. Social prescribing: less rhetoric and more reality. A systematic review of the evidence. *BMJ Open* 2017; 7: e013384.

Foster A, Thompson J, Holding E, et al. Impact of social prescribing to address loneliness: A mixed methods evaluation of a national social prescribing programme. *Health Soc Care Community* 2021; 29: 1439–49.

Hayes D, Jarvis-Beesley P, Michelle D, Polley M., Husk K., [On behalf of the NASP Academic Partners Collaborative]. The impact of social prescribing on children and young people's mental health and wellbeing. London, 2022.

Polley M., Hayes D, Husk K., Jarvis-Beesley P, Mitchell D, Keohane J. Social Prescribing for Children and Young People: A summary of findings from our recent snapshot survey. London, 2023.

Young Minds & The Children's Society. First port of call: The role of GPs in early support for young people's mental health. London, 2021.

## About you

Applicants should have, or expect to receive an upper second-class Bachelor's degree and a Master's degree (or equivalent work experience) in a relevant discipline or an overseas qualification of an equivalent standard. The successful candidate will deliver social prescribing to young people as part of TaLoS (training will be provided). Experience in child or youth mental health or wellbeing research is desirable.

## Eligibility

This studentship covers the cost of tuition fees based on the UK (Home) rate. Non-UK students can apply but will have to personally fund the difference between the UK (Home) rate and the overseas rate where they are not eligible for UK fee status.

The student will receive a starting stipend of £20,622 per annum (including London weighting) as well as the cost of tuition fees based on UK fee status.

## How to Apply

Enquiries regarding the post can be made to Dr Daniel Hayes ([d.hayes@ucl.ac.uk](mailto:d.hayes@ucl.ac.uk))

To apply, please send (I) a current CV including the contact details of two professional referees, (II) a 1-sided A4 cover letter and (III) a 3-page research proposal, detailing any background literature (no more than half a page) and planned studies, including methods and analysis, to Dr Daniel Hayes ([d.hayes@ucl.ac.uk](mailto:d.hayes@ucl.ac.uk))

**Closing deadline for applications: 12<sup>th</sup> February 2024**