

the **social**  
**biobehavioural**  
research group

# Wellbeing While Waiting

How can social prescribing help young people waiting for mental health support?

In partnership with the Anna Freud National Centre for Children and Families, National Academy for Social Prescribing and the Streetgames

Generously funded by the Prudence Trust

# Background

Experiences of youth and caregivers waiting for mental health services in the UK: a qualitative study to inform policy and practice

## Author Information

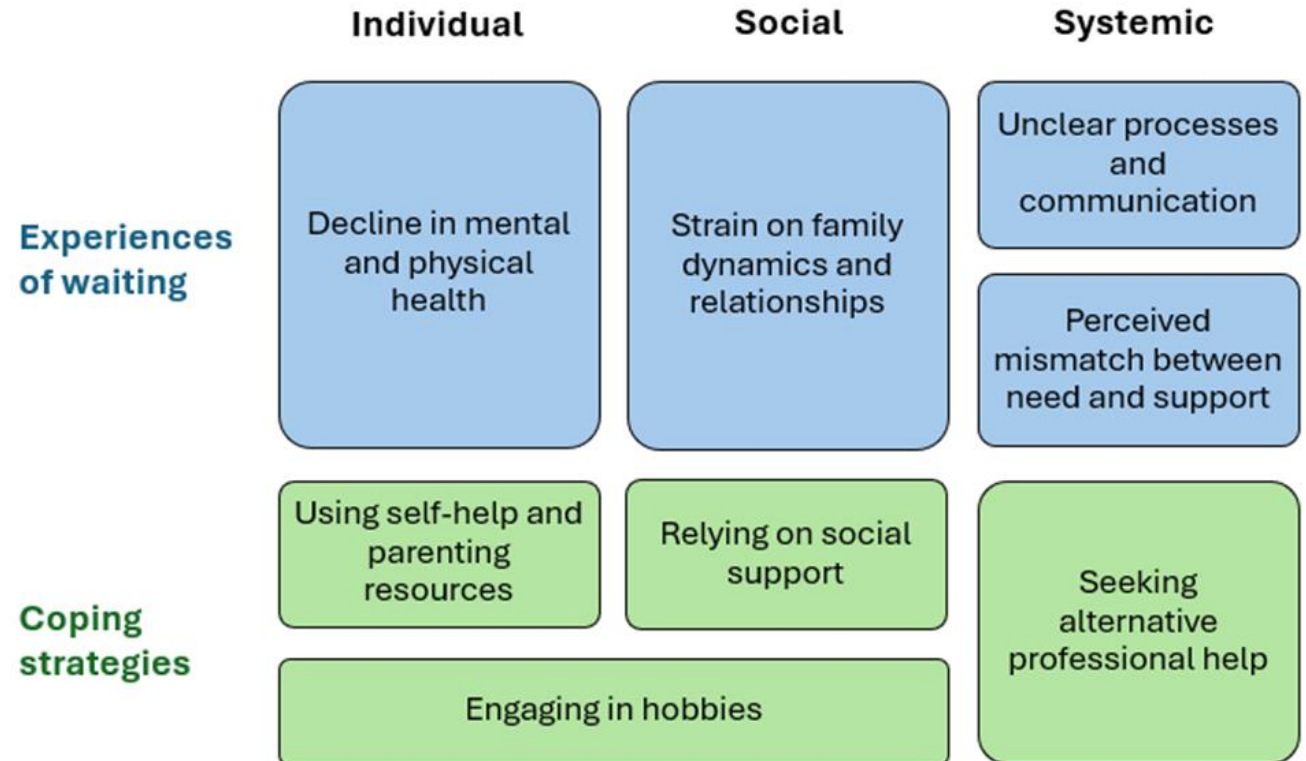
Emeline Han,<sup>a</sup> Alexandra Burton,<sup>a</sup> Alexandra Bradbury,<sup>a</sup> Daniel Hayes,<sup>a</sup> Joely Wright,<sup>a</sup> Lou Sticpewich,<sup>a</sup> Joanna Page,<sup>a</sup> Daisy Fancourt<sup>a</sup>

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*“I got angry at myself more often. And loads of intrusive thoughts, self-harm and I think it did get worse.”  
(young person)*



# Wellbeing While Waiting: Overview

STUDY PROTOCOL

Open Access

## Wellbeing while waiting evaluating social prescribing in CAMHS: study protocol for a hybrid type II implementation-effectiveness study



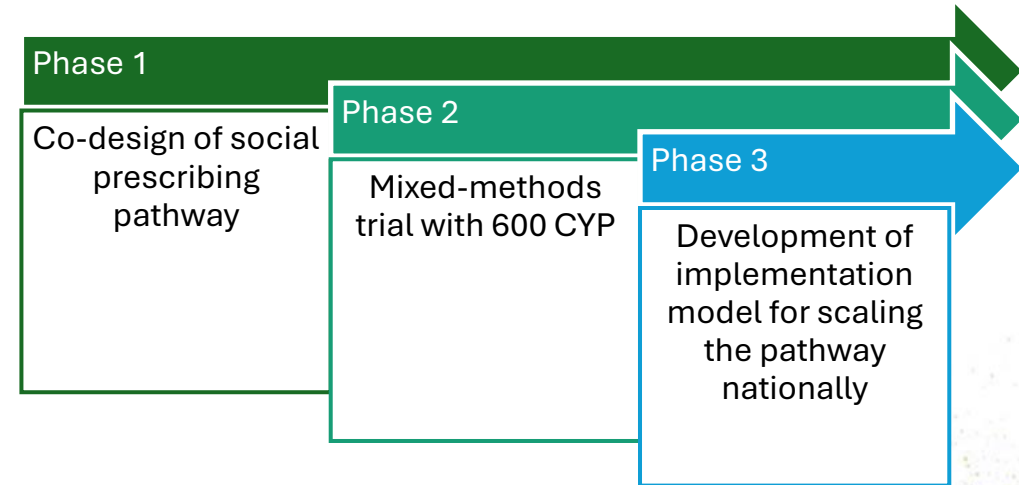
Daisy Fancourt<sup>1</sup>, Alexandra Burton<sup>1</sup>, Feifei Bu<sup>1</sup>, Jessica Deighton<sup>2</sup>, Richard Turner<sup>1</sup>, Joely Wright<sup>1</sup>, Alexandra Bradbury<sup>1</sup>, Marc Tibber<sup>3</sup>, Shivangi Talwar<sup>4</sup> and Daniel Hayes<sup>1,2\*</sup>

### Abstract

**Background** Social prescribing is a mechanism of connecting patients with non-medical forms of support within the community and has been shown to improve mental health and wellbeing in adult populations. In the last few years, it has been used in child and youth settings with promising results. Currently, pathways are being developed for social prescribing in Child and Adolescent Mental Health Services (CAMHS) to support children and young people on treatment waiting lists. The Wellbeing While Waiting study will evaluate whether social prescribing benefits the mental health and wellbeing of children and young people.

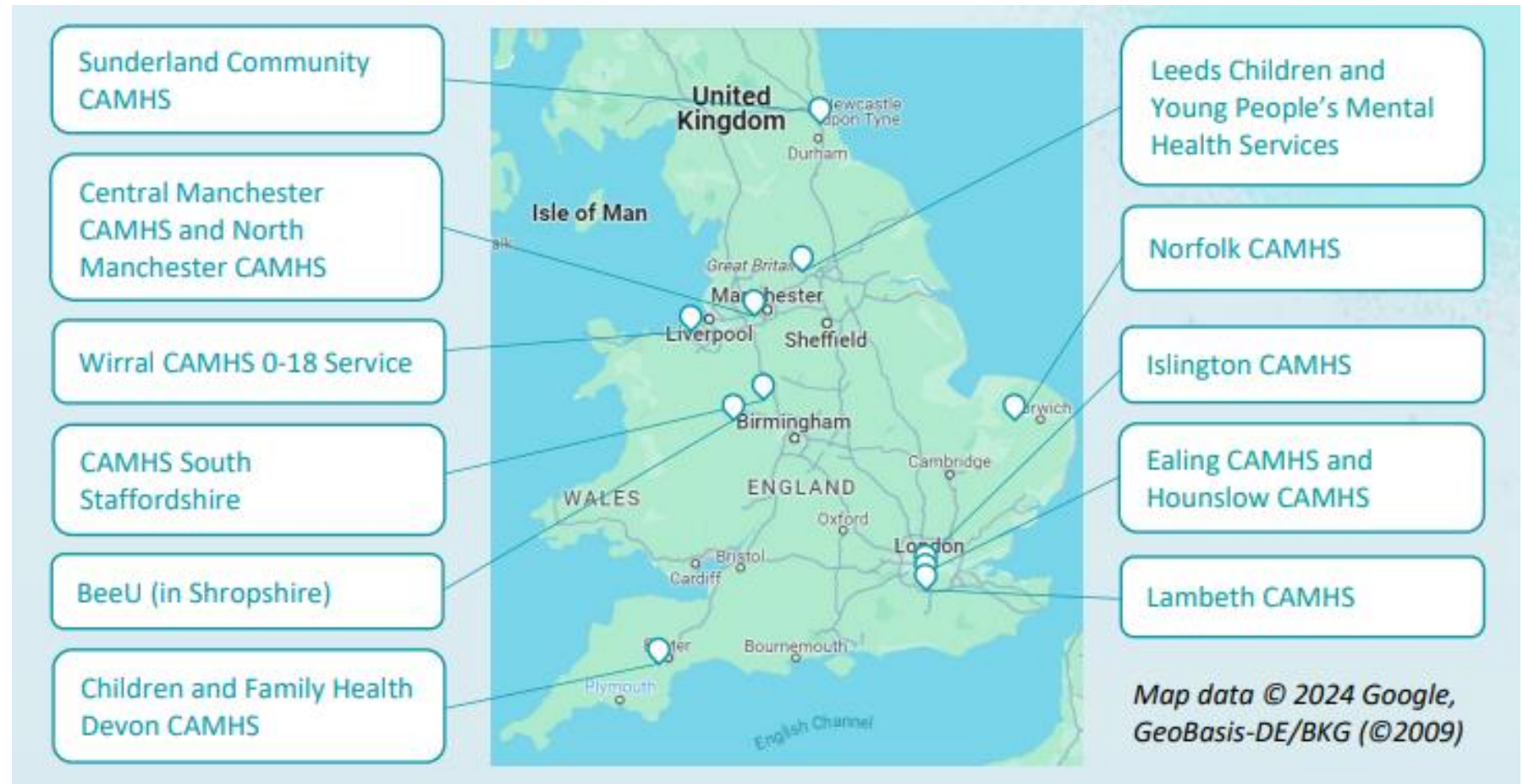
**Methods** This study utilises an observational, hybrid type II implementation-effectiveness design. Up to ten CAMHS who are developing social prescribing pathways as part of a programme run across England with support from the Social Prescribing Youth Network will participate. Outcomes for children and young people receiving social prescribing whilst on CAMHS waiting lists will be compared to a control group recruited prior to the pathway roll-out. Questionnaire data will be collected at baseline, 3 months and 6 months. Primary outcomes for children and young people are mental health symptoms (including anxiety, depression, stress, emotional and behavioural difficulties). Secondary outcomes include: loneliness, resilience, happiness, whether life is worthwhile, life satisfaction, and service use. An implementation strand using questionnaires and interviews will explore the acceptability, feasibility, and suitability of the pathway, potential mechanisms of action and their moderating effects on the outcomes of interest, as well as the perceived impact of social prescribing. Questionnaire data will be analysed mainly using difference-in-differences or controlled interrupted time series analysis. Interview data will be analysed using reflexive thematic analysis.

**Discussion** The Wellbeing While Waiting study will provide the first rigorous evidence of the impact of social prescribing for children and young people on waiting lists for mental health treatment. Findings will help inform the



# Wellbeing While Waiting: Method

- **Setting:** 11 CAMHS sites across England.



# Wellbeing While Waiting: Method

- **Setting:** 11 CAMHS sites across England.
- **Schedule:** Recruitment ran from May 2023 to March 2025.
- **Participants:** 568 CYP (224 Control and 344 Intervention) who:
  1. were aged 11-18 years old
  2. had capacity to give assent (11-15 year olds) or consent (16-18 year olds)
  3. who have been on the waiting list for CAMHS treatment for **less than one month**.
  4. who were RAG-rated as green/low amber.
  5. we **did not** recruit CYP with eating disorders, psychosis or severe and complex difficulties (judged by the assessing clinician).
- **Control group:** Prior to the Social Prescribing pathways going live, a smaller control group of CYP on the waiting list for CAMHS treatment were recruited, who do not currently have access to Social Prescribing.
- **Data collection:** Quantitative measures included: Strengths and Difficulties (SDQ), Depression and Anxiety (RCADS), Stress (PSS), Resilience (Student Resilience Survey), Wellbeing metrics (ONS 3)



# Wellbeing While Waiting: Social Prescribing in practice (remote sessions)



## Creative prompts

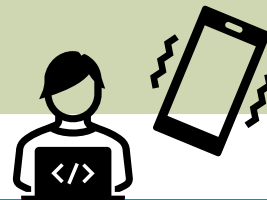


Designing weekly art activities – like themed drawing prompts – that can be completed over video, creating consistent expectations for sessions and opportunities for young people to express themselves and share their feelings

## Mentoring exercises

E.g. 'the ladder of success'

Using individually-adapted mentoring resources to help young people identify their goals, explore what steps they need to take to achieve them, and consider who can help them get there – can take place over the phone!



## What matters to you?

Encouraging young people to set their own agenda for sessions and bring topics, feelings, and ideas to discuss – or even their favourite artwork, football jersey or Lego kit as a conversation starter



# Wellbeing While Waiting: Social Prescribing in practice (in person sessions)

## Getting outside

Providing the support, rationale, and opportunity for young people to get out of the house and into nature or their neighbourhood



## Meeting in local spaces

Empowering young people to meet with their link worker in the community and practise the skills needed to engage in activities and everyday life

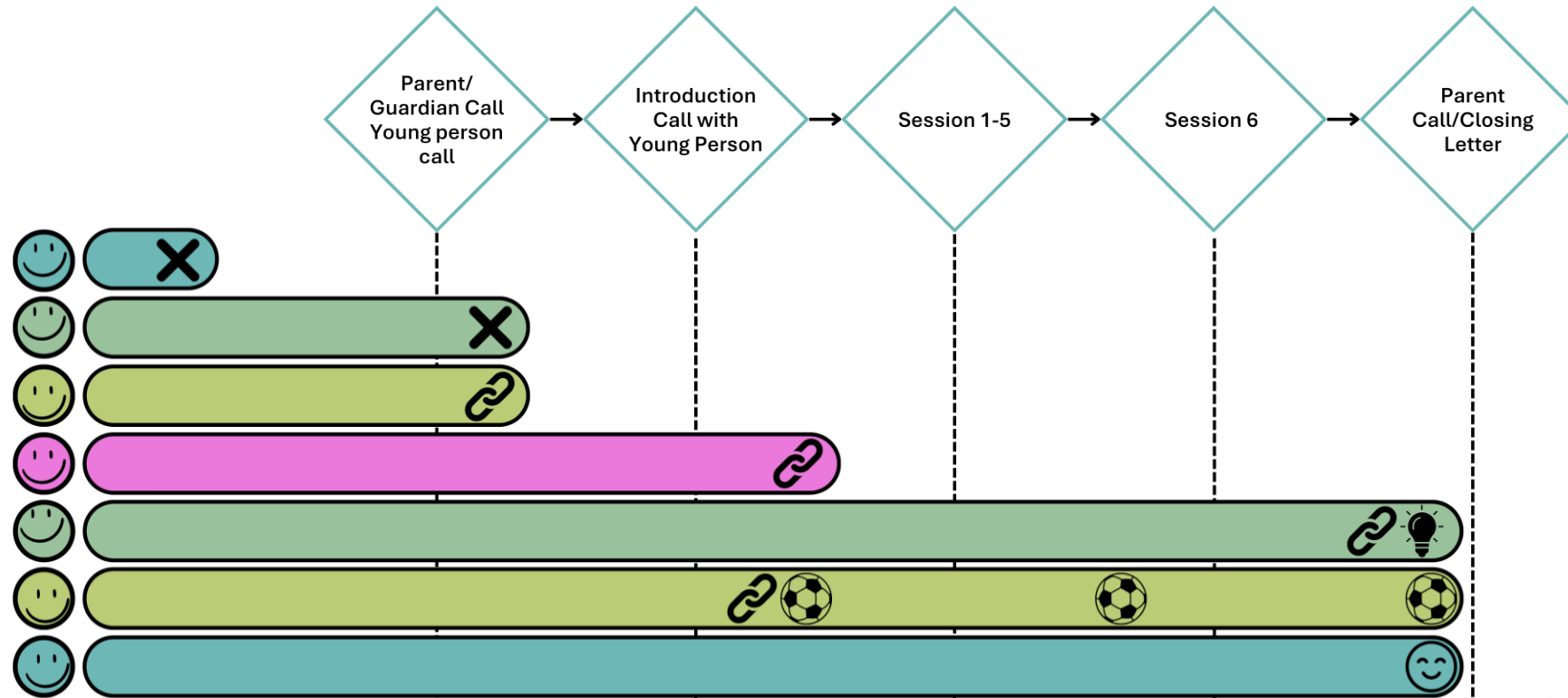


## Accompaniment

Going with young people to groups and activities or supporting them to try something new for themselves



# Wellbeing While Waiting: Social Prescribing in practice

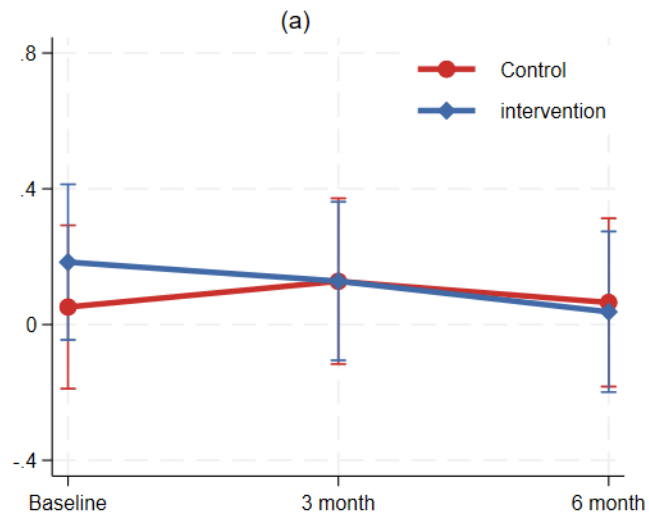


# Wellbeing While Waiting: Results

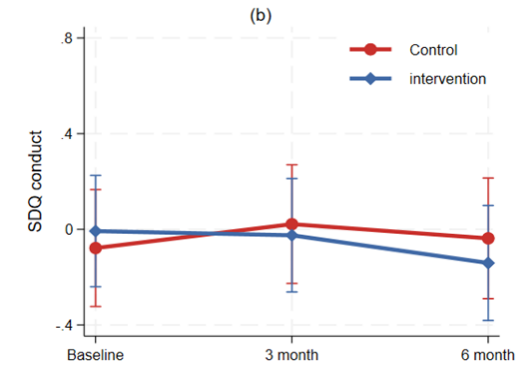
	Total (n=449)		Control group (n=201)		Intervention (SP) group (n=248)	
	Freq	Mean (SD) / %	Freq	Mean (SD) / %	Freq	Mean (SD) / %
Age	449	13.97 (1.72)	201	13.94 (1.79)	248	14.00 (1.68)
Gender: male	140	31.2%	59	29.4%	81	32.7%
Gender: female	298	66.4%	134	66.7%	164	66.1%
Gender: other	11	2.4%	<10	4.0%	<5	1.2%
Ethnicity: white	369	82.2%	157	78.1%	212	85.5%
Ethnicity: other	80	17.8%	44	21.9%*	36	14.5%
School meals: yes	151	33.6%	68	33.8%	83	33.5%
School meals: no	298	66.4%	133	66.2%	165	66.5%
IMD 1 (most deprived)	139	31.0%	51	25.4%	88	35.5%*
*IMD 2	108	24.1%	55	27.4%	53	21.4%
IMD 3	91	20.3%	41	20.4%	50	20.2%
IMD 4	73	16.3%	36	17.9%	37	14.9%
IMD 5 (least deprived)	38	8.5%	18	9.0%	20	8.1%

# Wellbeing While Waiting: Results

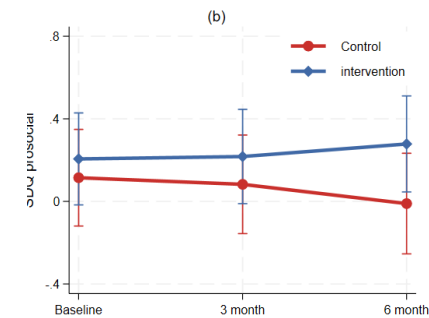
## SDQ total difficulties\*



## SDQ conduct difficulties\*

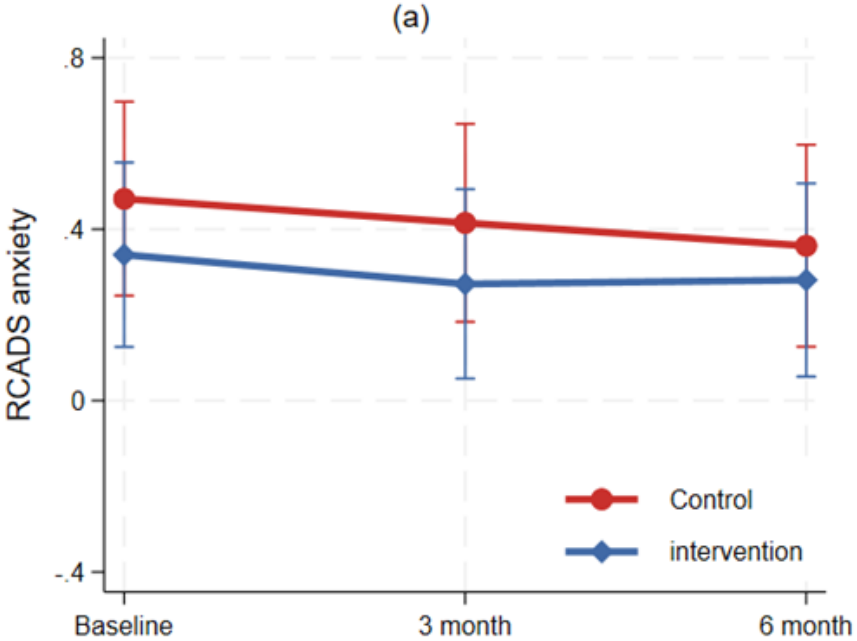


## SDQ prosocial behaviour\*

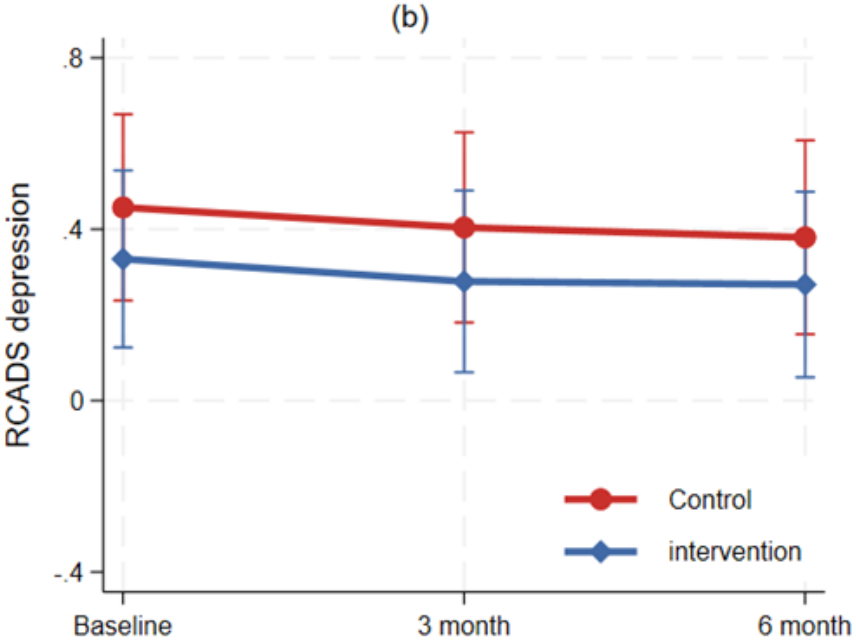


# Results: Mental health

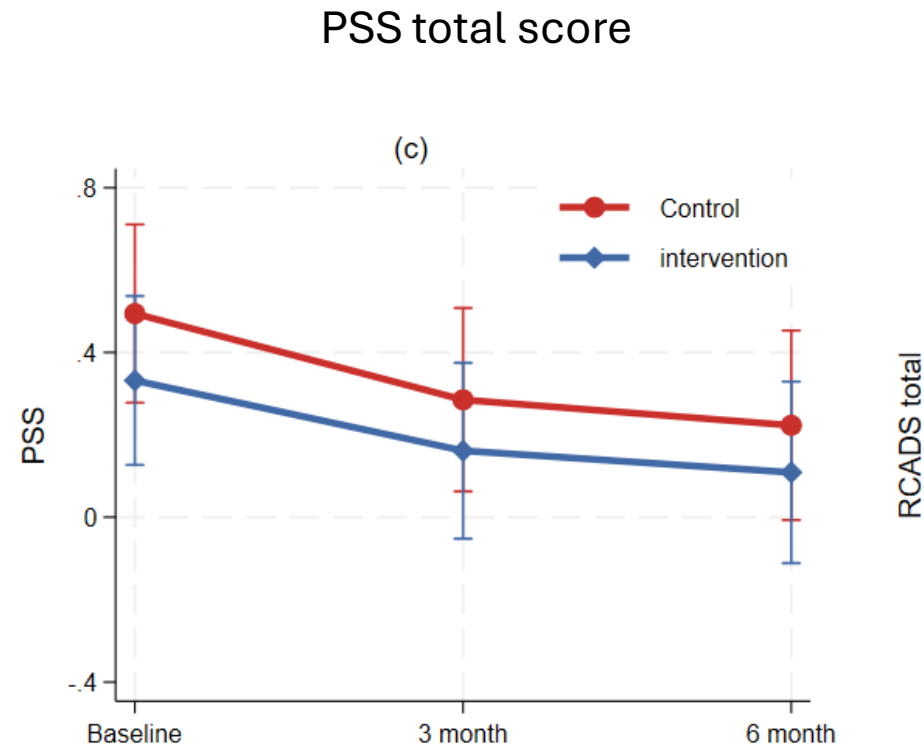
RCADS anxiety



RCADS depression

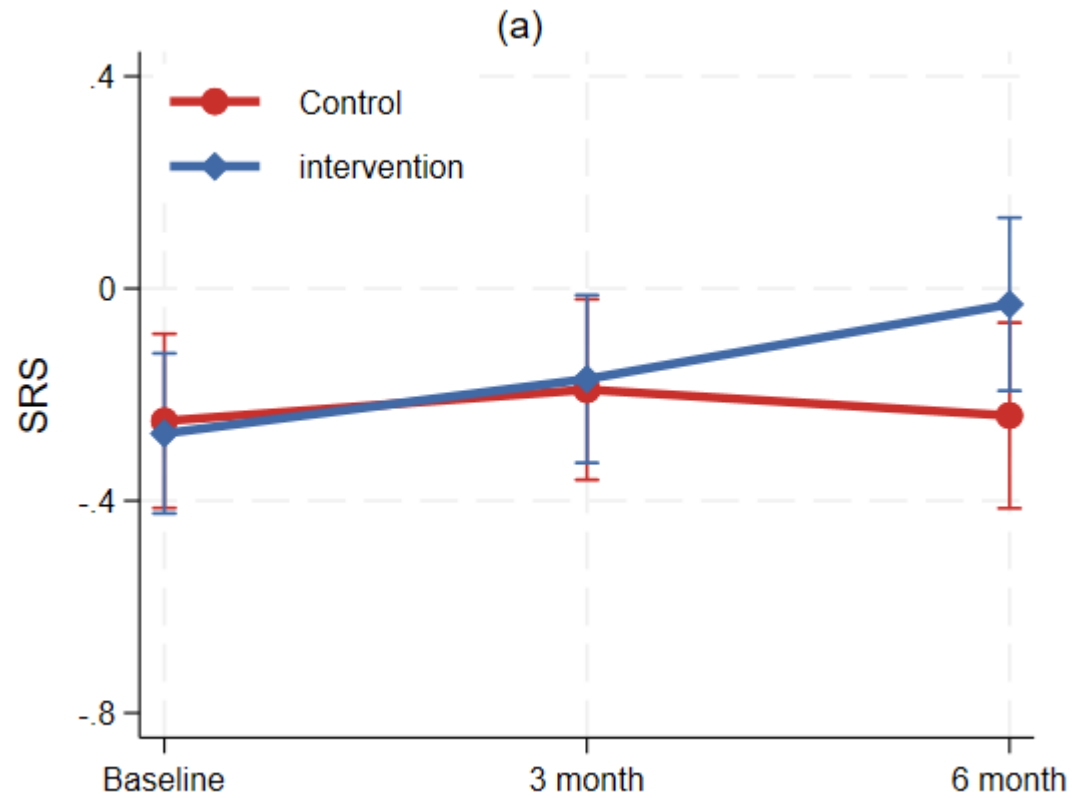


# Results: Mental health

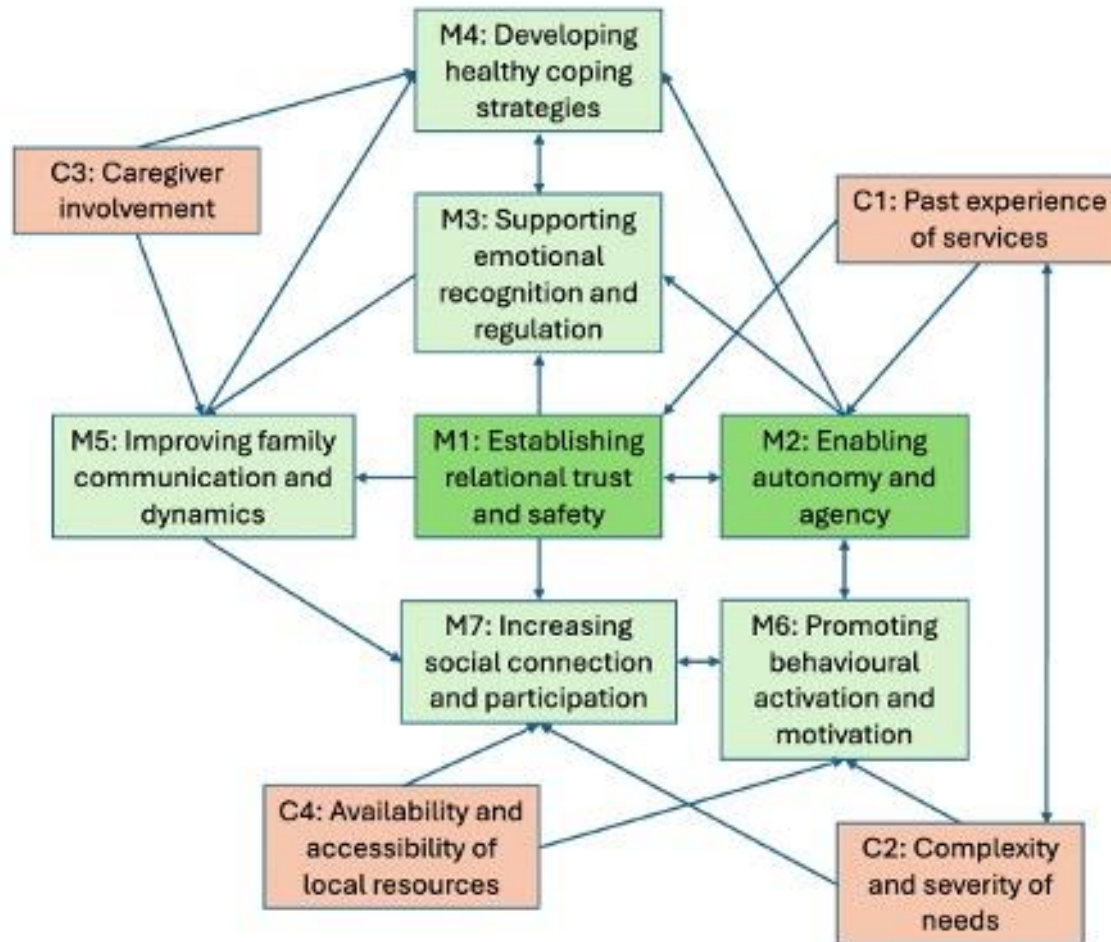


# Wellbeing While Waiting Results: Resilience

SRS: Resilience\*



# Wellbeing While Waiting: Qualitative Findings (young people and caregivers)



- Purposefully sampled 15 young people and 17 caregivers allocated to the social prescribing arm
- Majority of young people aged under 14 years
- Range of difficulties but age mood difficulties were the most common
- 7 distinct mechanisms and 4 contextual factors were identified

# Wellbeing While Waiting: Qualitative Findings

## M1: Building Trusting Relationships

*“He was asking stuff about you, trying to get you out of that bubble you have, but not being too invasive... to say this is like **your safe space, you can open up.**” (Young person\_001)*

*“She just had that connection with him, and that's quite unusual for someone that's so unfamiliar to just be able to connect with him on that sort of level. And I think that was because she was so interested in what he was saying to her and she was **actually listening** and **taking in the details and then bringing them up at a later date** to make conversation with him.” (Caregiver\_007)*

*“I think one of the things he liked a lot was that [the link worker] said, do you want mum to be there on the phone call or not? And he could just say no, I don't want her on the phone. So, it became his. I could see his face light up. **It was almost like this has got nothing to do with you, mum. This is just me.**” (Caregiver\_015)*

## M2: Enabling autonomy and agency

# Wellbeing While Waiting: Qualitative Findings

## C2: Complexity and severity of needs

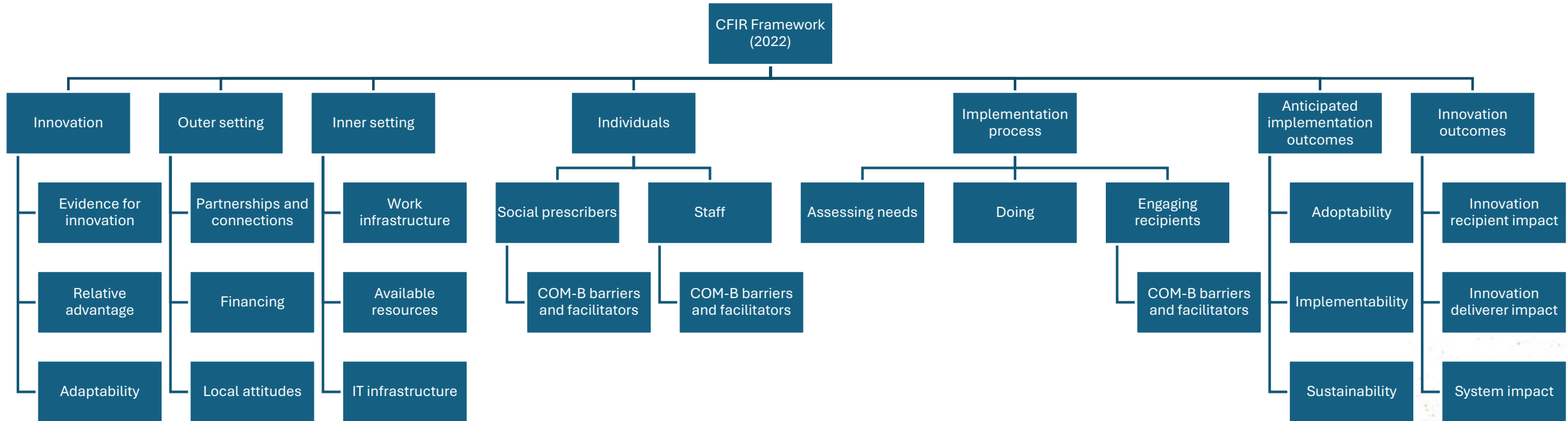
*“I think every child is obviously going to be different and some children will happily engage... It might be that a child who has just got mental health issues will probably be able to engage, whereas children with SEN won't necessarily be able to, **they will probably need different accommodations depending on the child.**”*

*(Caregiver\_006)*

*“It’s very difficult supporting a child who's got anxiety and trying to react to the anxiety with your own anxiety about it. So, just **having somebody to help navigate the deep waters and knowing that they are there if you need them really does mean a lot.**” (Caregiver\_004)*

## C3. Involvement of caregivers

# Wellbeing While Waiting: Qualitative Findings (CAMHS Staff a Link Workers)



- Purposefully sampled 23 participants (11 LWs and 12 CAMHS staff)
- Analysed using Consolidated Framework for Implementation Research 2022 to help investigate implementation factors (and COM-B where relevant)

# Wellbeing While Waiting: Qualitative Findings

## Innovation: Evidence

*“The evidence base for depression is that the behavioural activation part of it actually makes the biggest difference. Other parts of adult mental health services, for example, if you look at the first episode of psychosis service or chronic like long-term illness services... they'll have specific vocational workers. And the vocational worker in essence is a social prescriber.” (CAMHS worker)*

*“Social prescribing depends upon an active and thriving voluntary sector. So it's all well and good to say we've got a team of social prescribers, and we're gonna refer people out to voluntary sector activities. If that voluntary sector is **not adequately resourced and adequately funded you, social prescribers have got nothing to link people in with**” (CAMHS worker)*

Outer setting:  
partnerships  
and financing

# Wellbeing While Waiting: Qualitative Findings

Inner setting:  
Infrastructure

*“I think the main challenges for us really were kind of embedding the support within CAMHS services. So that was more from like their **data security requirements and ensuring that we were able to, yeah, fully embed ourselves** within the support that they provided.”*  
(Link Worker)

*“Young people could still be deteriorating, so if a young person has gone in with, say, an autism diagnosis, they really need specialist support to help them in their day-to-day life. Then **I'm not the person for that**, I'm there for a chill and a hang out and we can have fun together. But **I can't talk about the specialist things**. I can't put things in places with school to kind of sort that.”*  
(Link Worker)

Individual  
barriers

*“I think a really big thing is retaining link workers and that includes upskilling them. **I think that includes good clinical supervision and also managing workload and capacity.**”*  
(Link Worker)

# Wrapping up



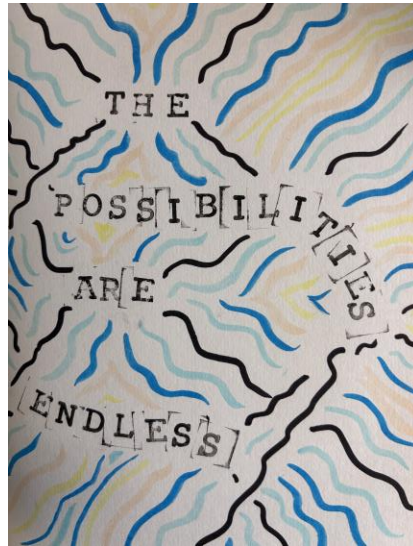
This is the first robust trial to demonstrate social prescribing can **positively impact mental health difficulties for young people**



Novel findings, in addition to above, are an **increase in resilience**



This suggests that social prescribing could be an effective tool in helping support youth mental health in specialist setting whilst they wait for treatment



## Our vision

**To have a fully developed and tested model  
for embedding Social Prescribing within CAMHS waiting lists  
that can be implemented for all CYP across CAMHS nationally**

# Further Resources

[sbbresearch.org/projects/wellbeing-while-waiting-inspyre/](https://sbbresearch.org/projects/wellbeing-while-waiting-inspyre/)



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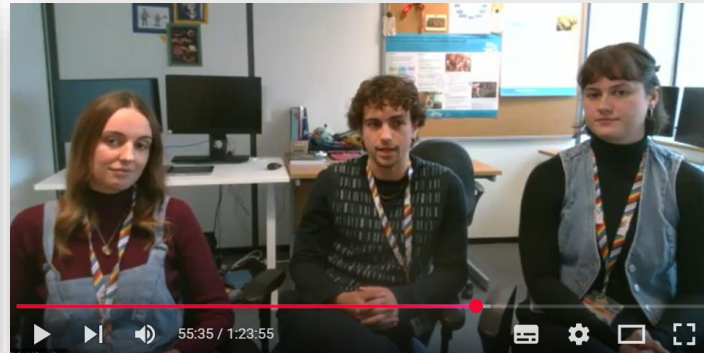
UCL

## Social Prescribing in Child and Adolescent Mental Health Services: A Guide for CAMHS Practitioners

LEARNINGS FROM PHASE I OF THE  
UCL 'WELLBEING WHILE WAITING' STUDY

APRIL 2024

This guide documents how NHS Child and Adolescent Mental Health Services (CAMHS) have launched social prescribing (SP) services for children and young people (CYP) who are on CAMHS waiting lists for mental health care. This initiative forms part of 'Wellbeing While Waiting', a three-year study launched in 2022 by the Social Biobehavioural Research Group at University College London to explore how SP can support the mental health and wellbeing of CYP whilst they are waiting for care. Six hundred CYP between the ages of 11 and 18 are involved in the study. This guide was produced to support CAMHS staff throughout the NHS in developing and scaling SP services in the future.



UCL

### Lunch Hour Lecture

#### Social Prescribing: Ground-breaking or Gimmicky?

evidence from clinical trials, cohort studies and electronic patient records

Prof Daisy Fancourt  
Professor of Psychobiology & Epidemiology  
Head, Social Biobehavioural Research Group, UCL  
Director, WHO Collaborating Centre on Arts & Health  
[sbbresearch.org](https://sbbresearch.org)

the social  
biobehavioural  
research group

World Health  
Organization

Virtual Event  
4 March 2025  
1pm-2pm

Fancourt et al. BMC Psychiatry (2023) 23:28  
<https://doi.org/10.1186/s12888-023-04758-0>

BMC Psychiatry

Open Access

## Wellbeing while waiting evaluating social prescribing in CAMHS: study protocol for a hybrid type II implementation-effectiveness study

Daisy Fancourt<sup>1</sup>, Alexandra Burton<sup>1</sup>, Felicia Bu<sup>1</sup>, Jessica Deighton<sup>2</sup>, Richard Turner<sup>1</sup>, Joely Wright<sup>1</sup>,  
Alexandra Bradbury<sup>1</sup>, Marc Tibber<sup>3</sup>, Shivangi Talwar<sup>4</sup> and Daniel Hayes<sup>1,2\*</sup>

**Abstract**  
**Background** Social prescribing is a mechanism of connecting patients with non-medical forms of support within the community and has been shown to improve mental health and wellbeing in adult populations. In the last few years, it has been used in child and youth settings with promising results. Currently, pathways are being developed for social prescribing in Child and Adolescent Mental Health Services (CAMHS) to support children and young people on treatment waiting lists. The Wellbeing While Waiting study will evaluate whether social prescribing benefits the mental health and wellbeing of children and young people.  
**Methods** This study utilises an observational, hybrid type II implementation-effectiveness design. Up to ten CAMHS who are developing social prescribing pathways as part of a programme run across England with support from the Social Prescribing Youth Network will participate. Outcomes for children and young people receiving social prescribing whilst on CAMHS waiting lists will be compared to a control group recruited prior to the pathway roll-out. Questionnaire data will be collected at baseline, 3 months and 6 months. Primary outcomes for children and young people are mental health symptoms (including anxiety, depression, stress, emotional and behavioural difficulties). Secondary outcomes include loneliness, resilience, happiness, whether life is worthwhile, life satisfaction, and service use. An implementation strand using questionnaires and interviews will explore the acceptability, feasibility, and suitability of the pathway, potential mechanisms of action and their moderating effects on the outcomes of interest, as well as the perceived impact of social prescribing. Questionnaire data will be analysed mainly using difference-in-differences or controlled interrupted time series analysis. Interview data will be analysed using reflexive thematic analysis.  
**Discussion** The Wellbeing While Waiting study will provide the first rigorous evidence of the impact of social prescribing for children and young people on waiting lists for mental health treatment. Findings will help inform the

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BMC

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Practical guides

Webinar recordings

Academic papers

# CASPA

## CAMHS And Social Prescribing Applications



**NHS**  
North London  
NHS Foundation Trust

**NHS**  
Norfolk and Suffolk  
NHS Foundation Trust



Not yet recruiting ⓘ

### CAMHS and Social Prescribing Applications (CASPA)

ClinicalTrials.gov ID ⓘ NCT07143383

Sponsor ⓘ University College, London

Information provided by ⓘ University College, London (Responsible Party)

Last Update Posted ⓘ 2025-09-10

Download

Save

Study Details

Researcher View

No Results Posted

# INACT

## INcreasing AdolesCent social & community support

PLOS ONE

STUDY PROTOCOL

### INcreasing Adolescent social and Community support (INACT): Pilot study protocol

Daniel Hayes<sup>1\*</sup>, Alexandra Burton<sup>1</sup>, Feifei Bu<sup>1</sup>, Neil Humphrey<sup>2</sup>, Pamela Qualter<sup>2</sup>, Emeline Han<sup>1</sup>, Lou Sticpewich<sup>1</sup>, Joely Wright<sup>1</sup>, Jessica K. Bone<sup>1</sup>, Sophia Maguire<sup>1</sup>, Lucas Caetano Gonzalez Umpierrez<sup>1</sup>, Emily Stapley<sup>2</sup>, Marc S. Tibber<sup>3</sup>, Daisy Fancourt<sup>1</sup>

**1** Research Department of Behavioural Science and Health, Institute of Epidemiology and Health Care, Social Biobehavioural Research Group, University College London, London, United Kingdom, **2** Manchester Institute of Education, School of Environment, Education and Development, The University of Manchester, Manchester, United Kingdom, **3** Evidence Based Practice Unit, University College London and the Anna Freud Centre, London, United Kingdom, **4** Department of Clinical, Educational and Health Psychology, Division of Psychology and Language Sciences, London, United Kingdom

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#### Abstract

#### Background

Social prescribing is a mechanism for connecting patients with non-medical forms of support within the community and has been shown to improve loneliness. Yet uptake from young people (YP) has been lower than for adults. That is thought to be the case because young people are less likely to engage with primary care for wellbeing support, where

OPEN ACCESS

Citation: Hayes D, Burton A, Bu F, Humphrey N, Qualter P, Han E, et al. (2025) INcreasing Adolescent social and Community support

**CAMHS**  
Child and Adolescent  
Mental Health Services

**Anna Freud**  
National Centre for  
Children and Families

  
Social Prescribing  
Network

 National Academy  
for Social Prescribing

**CORC**  
Child Outcomes  
Research Consortium 





## Members include...

*Link workers*  
*Social prescribing coordinators*  
*Voluntary and community workers*  
*Commissioners*  
*Funders*  
*Policymakers*  
*Health professionals*  
*Researchers*

**... in the UK and beyond**



## SPYN activities so far this year:



**19.03.2025** **News**

### Celebrating Social Prescribing Day 2025

To mark the occasion, we're sharing an exciting update for the Social Prescribing Youth Network and spotlighting our research project "Wellbeing While Waiting".

**30.04.2025** **Events**

### SPYN Member Meetup: Spring 2025

Join our first SPYN event of 2025 to connect with other members and hear from the coordinating team about upcoming activities and how you can get involved.

**09.07.2025** **Blog**

### Resource Recommendations for Youth Social Prescribing

In our recent Social Prescribing Youth Network (SPYN) Member Meetup, we asked attendees to share resource recommendations. Check out our crowdsourced list and read the event recap!

**27.03.2025** **News**

### Paid opportunity for young people interested in improving healthcare

We're currently recruiting young people (aged 16 – 21) to join our Youth Advisory Group for the Social Prescribing Youth Network.

# POLICY BRIEF

## Embedding and Sustaining Child and Youth Social Prescribing

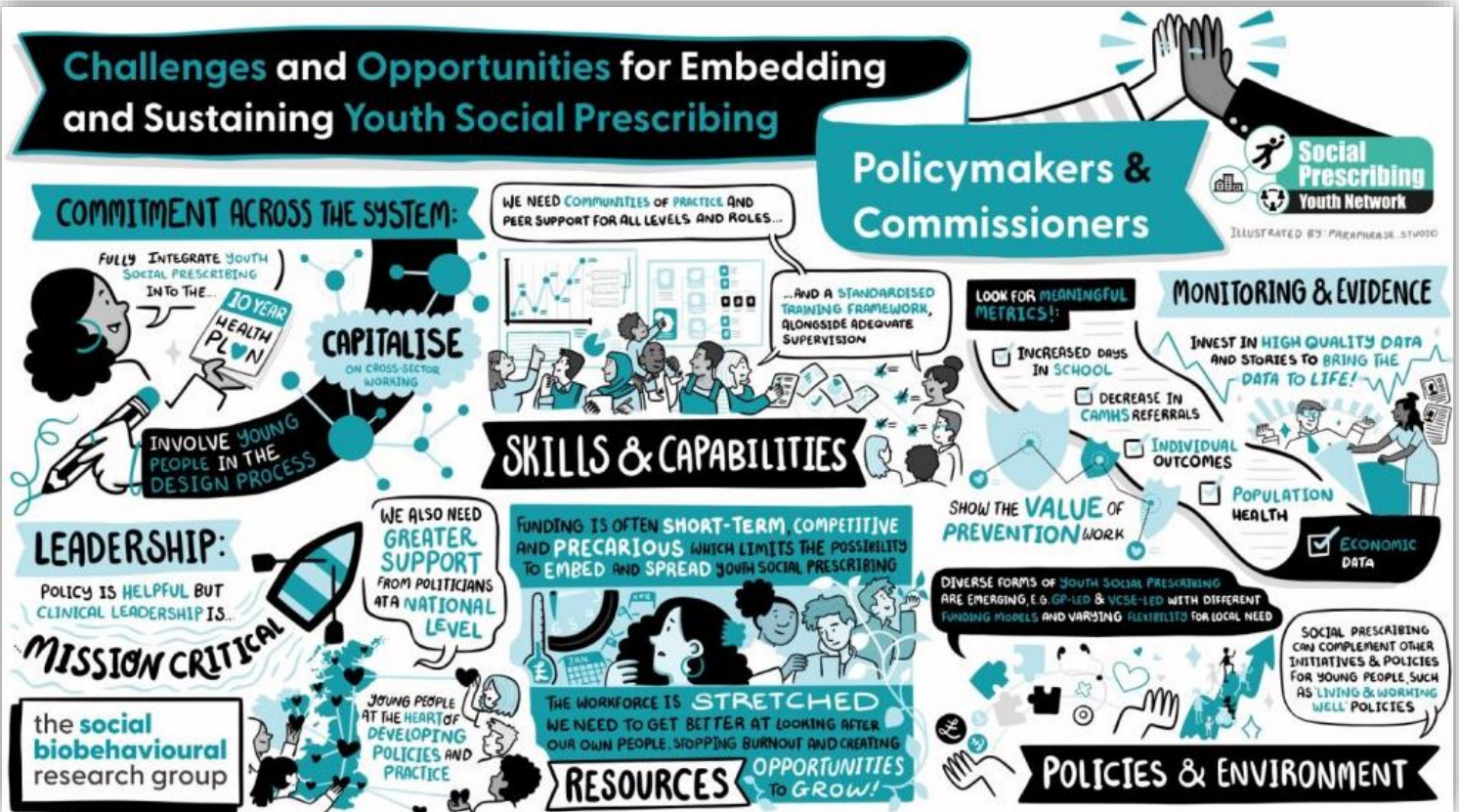
September 2025



the social biobehavioural research group



SOUTHBANK CENTRE



SPYN's current work to identify best practice for youth social prescribing

Join the Network to take part: [sbbresearch.org/spyn](https://sbbresearch.org/spyn)

## Quote from a young person and parent/caregiver

*“[My link worker] really helped me get back into social groups and social settings... [The group sessions] are **really fun and I've been able to make a lot of friends** from them. **They're a big support in my life and they've definitely helped...** 'Cause I can talk to people easier and just be in the same room as a bunch of people easier [sic].” (Young person\_012)*

*“The people on the team, which I think is quite a social thing for him, being part of a team and being good enough to be on the team because [my child] has always struggled with low self-esteem. And he seems to be quite popular with older kids too. So, **it's building him up, he's really benefiting from it.**” (Caregiver\_015)*

# Wellbeing While Waiting Team

## Professor



Prof Daisy Fancourt

## Principal Research Fellows



Dr Feifei Bu



Dr Dan Hayes

## Coordinators & Managers



Rachel Marshall



Nikita Arslanovski

## Research Fellows/Senior Research Fellows



## Research Assistants and Link Workers



Joely Wright



India Stuttard



Lou Sticpewich



Joanna Page