# Wellbeing While Waiting: Reflections on Youth Social Prescribing

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### An overview:

Social prescribing in the Wellbeing While Waiting research study

Considerations for social prescribing with young people

Session examples and the social prescribing journey

Three case studies

Remote vs. in-person session delivery

Challenges and opportunities for **CAMHS** 

# Our experiences of social prescribing...







 10 CAMHS sites overall offering social prescribing pathway as part of Wellbeing While Waiting



Diversity of social prescribing models and pathway design across sites



Localised and individualised approach to delivery



 Variation in young people's mental health presentation, circumstances, priorities and interests

High levels of interest and uptake!

82%

of young people referred to us to date have engaged in social prescribing sessions A **snapshot** of the interests & hobbies of the **60+** young people aged 11-18 we've worked with:





## Social prescribing with young people

Making sure the SP journey is clear, and expectations are set

Checking in with young people to make sure they want to be there

Collaborating with young person and parent to understand and address barriers

#### **Awareness & understanding**

Lack of 'buy in' – what is social prescribing?

Young people might not understand their mental health issues or CAMHS referral

Parental
expectation to
attend sessions
or engage with
support

Adult support needed to facilitate participation in sessions and activities

**Working with** 

**families** 

Differences between parental and young person's goals for intervention

Young people can't always choose to make big changes

Young people can struggle to identify where they would benefit from support – never been asked before!

Finding fun, accessible
ways to tackle
potentially challenging
conversations about
making changes

Facilitating meaningful engagement

Individualised, comprehensive research for each young person

Gamifying and tailoring sessions to match young people's interests and needs

Having a plan A-Z for sessions and being fine with none of them happening

### Remote session examples:



#### **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



### In-person session examples:



#### **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

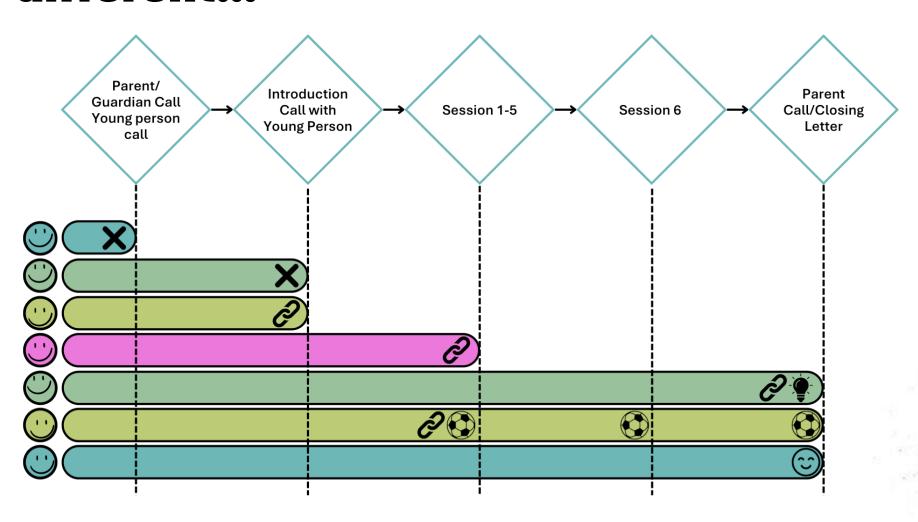




Going with young people to groups and activities or supporting them to try something new for themselves

Sessions are about building the time, space and trust for a young person to feel comfortable sharing what matters to them, whatever the format.

# **Every social prescribing journey is different...**

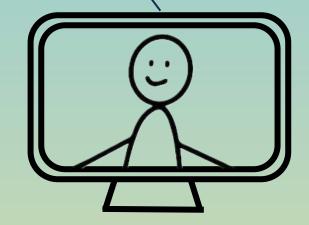


# Case Study 1: remote sessions & referral

Feelings of anxiety and panic, wanting autism-specific support but struggling to find any that are willing to deal with complexities, finding life very difficult, other life challenges.

Session 1: creating a positive space, building trust and respect with simple activities, e.g.

3 words to describe you 3 things you enjoy doing 3 things you'd like to do more of



Had clear interests and desires and very much enjoyed having a space to talk about them, so made activities tailored to continue conversation

(e.g. gaming)



Referred to a local tennis club by session 3 & attended the same week

Researched Contacted club for Quality Assurance

Young person approved Parents facilitated transport

WWW funded a tennis racket for the young person

Young person enjoyed tennis lessons and started going weekly, while continuing to attend the remaining weekly social prescribing sessions

While taking part in sport doesn't address the complexities for this young person, it did give them out an outlet, time outside, and physical activity outside of school

The continued SP gave the young person opportunity to explore more about themselves in a fun way, with space for them to talk about the things that mattered to them

**Case Study 2:** creative solutions & working with

Anxiety and social communication difficulties

Difficulties engaging in education and previously enjoyed hobbies and interests



parents

Managing expectations around readiness to think about the future

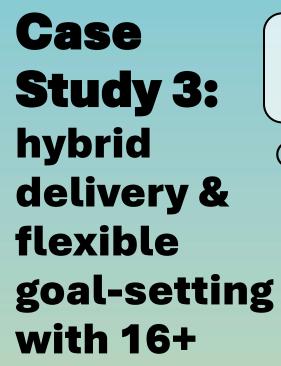
Thinking creatively to be able to hear young person's voice

> **Providing optional** activities to reflect on in their own time and with people they are comfortable with

Parents' anxieties around young person's engagement in education and next steps

> Working with parents to balance young person's needs and wants to communicate through parents whilst taking a young-personcentred approach

Provided information about activities, including a crochet club, youth campaigning organisation, horseriding





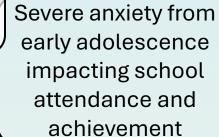
to meet remotely

Stopped training and competing - finding team environment challenging

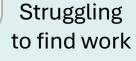
Talented athlete

with years of

experience



Left school at 16 with no qualifications



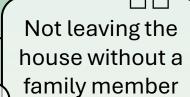


researching sports programmes

Growing focus on experiences of school, teachers and learning support

Decided to enrol in college, accompanied by social prescriber and parent

Tried out a free employment mentoring programme for young people aged 16-24 not in work or education

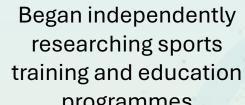


Initial session focus on sports, related dreams and ambitions, and positive prior experiences

Requested



Decided to return to training and started attending trials



### Reflections on session format

#### Remote

- Meeting young people where they are
- Maximum flexibility with timing
- Technological access considerations
- Confidentiality at home



#### In-person

- Getting young people out the house
- New experiences
- Cost and barriers to entry
- Confidentiality in the community



#### **Hybrid**

- Navigating attention and distractions
- Need for creative and adaptive approach towards session planning
- Coordinating with parents and guardians
- Option for a stepped and/or hybrid session model



# Challenges to consider...

# Defining social prescribing

- Making sure that young people, parents, guardians and clinicians have a shared definition of the intervention
- Affirming and supporting youth-led goal setting
- Managing expectations about 'what comes next' in clinical pathway
- Social prescribing as a nonclinical intervention

#### **Suitability of support**

- Assessing appropriate referrals and reviewing risk with clinical input
- Identifying and coordinating with support network
- At beginning of CAMHS
  journey, young people may not
  have other professionals
  involved in their support
- May not see the benefits of targeting social determinants of health on mental health in the short term

#### **Community resource**

- Difficulties identifying confidential, weatherappropriate, non-clinical spaces to meet young people
- Transportation barriers
- Shortage of low-cost or fully funded local activities
- Rapidly changing landscape of youth activities and groups
- Lack of youth input to shape local offer

# Benefits and opportunities for social prescribing in CAMHS

#### Consistency

Offering young people regular check-ins with a trusted adult at the point of seeking care

#### **Flexibility**

Time and space to work flexibly with young people, accommodate short, introductory conversations, and re-schedule at short notice

# Strengths-based approach

Facilitating different kinds of conversations than clinical and social care professionals

#### **Self-reflection**

Encouraging young people to find out more about themselves and what works for them

#### Young person-led

Supporting young people to take ownership of their choices and identify with their values and priorities

# Thanks for listening!