Mental Health Leaders Award @ EHU

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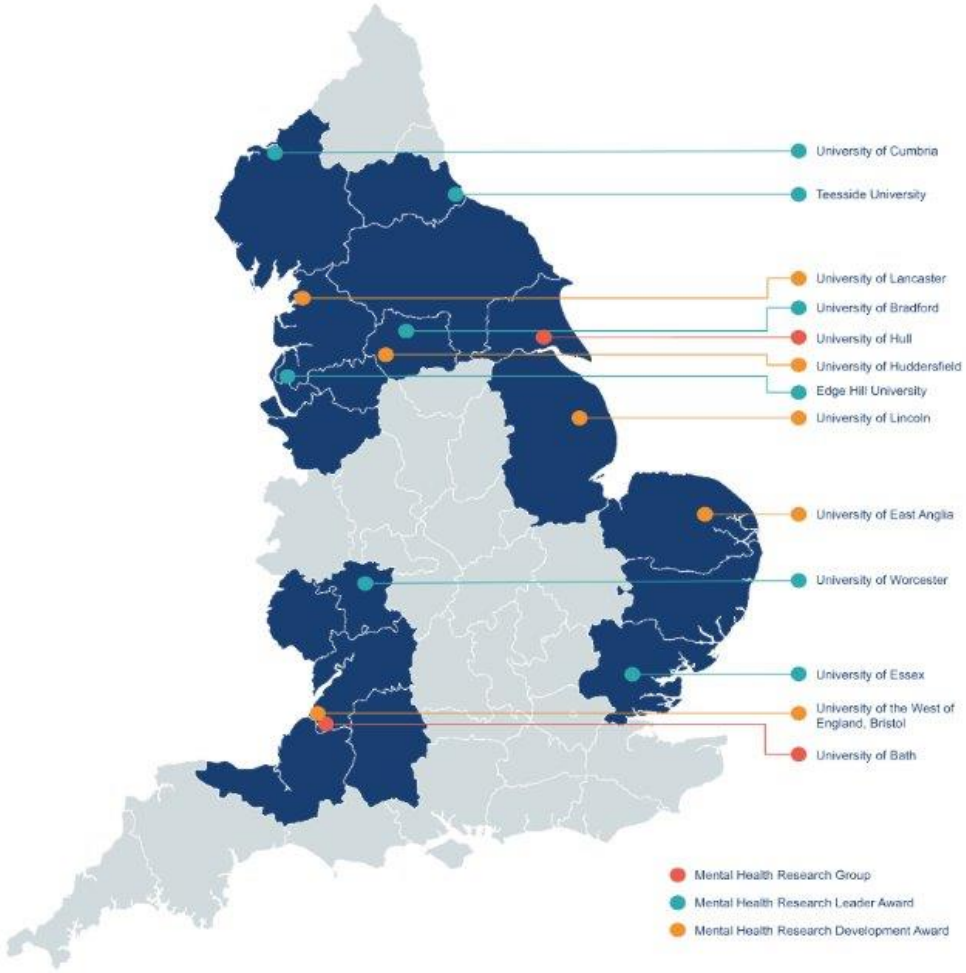
- Overview of the Mental Health Leaders Award @ EHU
- Health based examples of applied research
  - Improving access and scalability
  - Improving targeted interventions

- Establish up to 10 NIHR Mental Health Research Groups (MHRGs) in England in “target areas” with
  - high burden of mental health conditions
  - limited local mental health research capacity
  - low recruitment into mental health research studies

- **“Target areas”** — geographic regions where mental health problems are common but research infrastructure and participation remain under-developed.

- **Mental Health Research Development Award** - designed to support HEIs to carry out targeted preparatory work to develop a competitive MHRG application. £150,000 over a 12 month period.
- **Mental Health Leaders Award -** designed to allow the HEI to establish a mental health research team with the ambition of applying for a MHRG award within two years. £2.5 million over a 5 year period .
- **Mental Health Research Group Award** – designed to support the development and delivery of high quality applied mental health research, and research teams, across England. £11 million over a 5 year period.



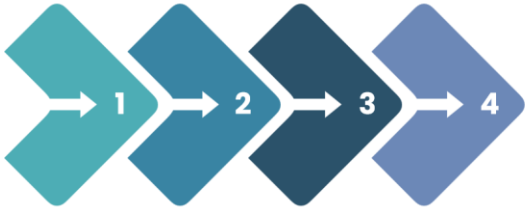
Improving sustainable access to high-quality primary care and community mental health interventions: an asset-based community development approach (ISACC-ABCD)

- NHS Mental Health Programme Demand Signalling - key evidence gaps in relation to community level prevention programmes for Children and Young people

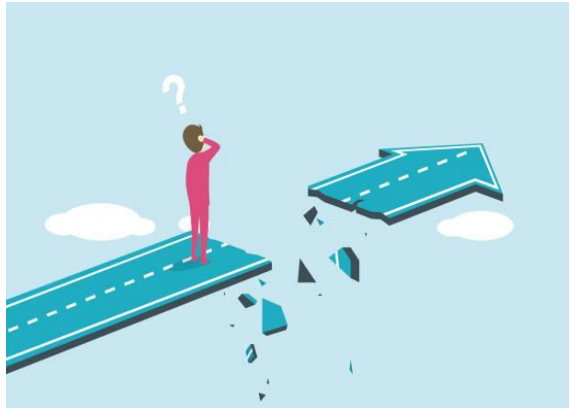
- EHU ‘Better Mental Health Fund’ review of NW mental health services
  - CYP population amongst the highest burden anxiety / depression in country
  - Under resourced support, overburdened services
  - Lack of evidence about how to improve equitable access to mental health support across communities
  - Financial limitations across local authorities and integrated care systems

- Marmot 'All Together Fairer’ - identified the co-creation / equitable use of community interventions to help tackle prevailing health and social care inequalities as strategic priority area.

- Work Package 1: Contextual factors and Community Engagement
  - Objective 1: To co-produce the project plan with community members using the Asset-Based Community Development Approach
- Work Package 2: Access to asset-based interventions
  - Objective 2: To explore how patients are judged as eligible, identified and referred to asset-based interventions.
- Work Package 3: Effectiveness, cost-effectiveness, and inequalities
  - Objective 3: To investigate how referrals and uptake vary by population group and what factors are associated with inequalities in access.
  - Objective 4: To investigate the effectiveness / cost effectiveness of ABCD approaches in improving mental health outcomes and health equity outcomes for CYP.
- Work Package 4: Sustainability and Implementation
  - Objective 5: To navigate the complexities of integrating ABCD approaches with formal healthcare systems and services
  - Objective 6: To examine the issue of sustainability by exploring strategies to sustain community-driven mental health initiatives for CYP over the long term
  - Objective 7: To assess the level of support and funding from policymakers for ABCD initiatives in mental health



- Access – gap between community and NHS offer?
- How accessible are mental health interventions?
- Paediatric examples of applied research
  - Example 1 – improving access and scalability
  - Example 2 – improving targeted interventions



- Young people with long-term physical health conditions often have higher rates of emotional and behavioural difficulties but traditional mental health services can be difficult to access with inequity of provision
- Lack of targeted services for CYP with physical health conditions and lack of targeted resources

- Initiative designed to provide early, accessible, low-intensity psychological support for children and young people who are being treated for long-term physical health conditions and who are experiencing emotional difficulties.
- It specifically aims to fill gaps in mental health care access

for this group by offering support that is:

  - self-referral rather than formal referral
  - drop-in and low threshold
  - focused on mild-to-moderate needs

- The name is inspired by the Peanuts character Lucy's "psychiatric help booth" — emphasising immediate, informal support without long waits or convoluted referral pathways.

- Initially trialled at GOSH to access feasibility and acceptability
- Further research on the Lucy Project suggests:
  - Improved emotional and behavioural symptoms after participation
  - Increased quality of life scores in participants
  - Health economic analyses indicate the intervention is cost-effective under typical NHS cost thresholds — meaning good value relative to health gains
  - Participants and families report the service as *highly acceptable and valuable*, particularly because it's fast to access and supportive without being intrusive

- ARC NW Coast funded small scale qualitative project with CYP with chronic conditions and their families to improve access to targeted information
- Information sharing at start of health journey – CYP, parents, clinicians
- Focus on wide impact – building blocks of change
- Focus on two main themes - 'not feeling alone' and 'having a shared language'
- Animation Project

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