Developing a logic model for hub-based social prescribing to support youth mental health

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Background

Many children and young people (CYP) with mental health needs do not access traditional mental health services, underscoring a pressing public health challenge and the need for more inclusive and accessible support[1]. Social prescribing (SP), which connects CYP to non-clinical resources such as arts, sports, and youth services, offers a promising alternative[2].

While early evidence is positive[3,4], SP delivery models for CYP remain under-evaluated. This study explored a hub approach to SP[5], where a team of professionals supports CYP with mental health difficulties in accessing non-medical community support. We addressed two research questions: (1) How does a hub SP model support CYP with mental health difficulties? and (2) What areas require improvement to strengthen this model?

The New-MAC

The Newham Multi-Agency Collaborative (New-MAC) is a hub-based SP programme supporting CYP aged 8–18 in Newham, East London. One of the most deprived boroughs in London, Newham presents high child poverty levels (45%) and a young population (average age 32)[6].

Unlike the mainstream SP Link Worker model[7], implemented nationally in the UK through the NHS, the New-MAC is led by the Local Authority and connected to secondary care (Children and Adolescent Mental Health Services). The programme actively engages local Voluntary and Community Sector (VCS) organisations alongside other statutory services, with the primary aim of providing timely, free access to community-based activities and services that support the mental health of CYP.

Methods

We are a multidisciplinary group of professionals and researchers involved in the delivery and evaluation of a SP hub initiative in East London. To explore how a hub approach supports CYP's mental health, we co-created a logic model through a series of five workshops with members of participating organisations and London Borough of Newham (LBN) staff responsible for New-MAC delivery.

During the workshops, we discussed the programme's processes, challenges, and opportunities, and represented the outcomes of these discussions in a simplified, visual form[8].

Results

1) How does a hub SP model support CYP with mental health difficulties?
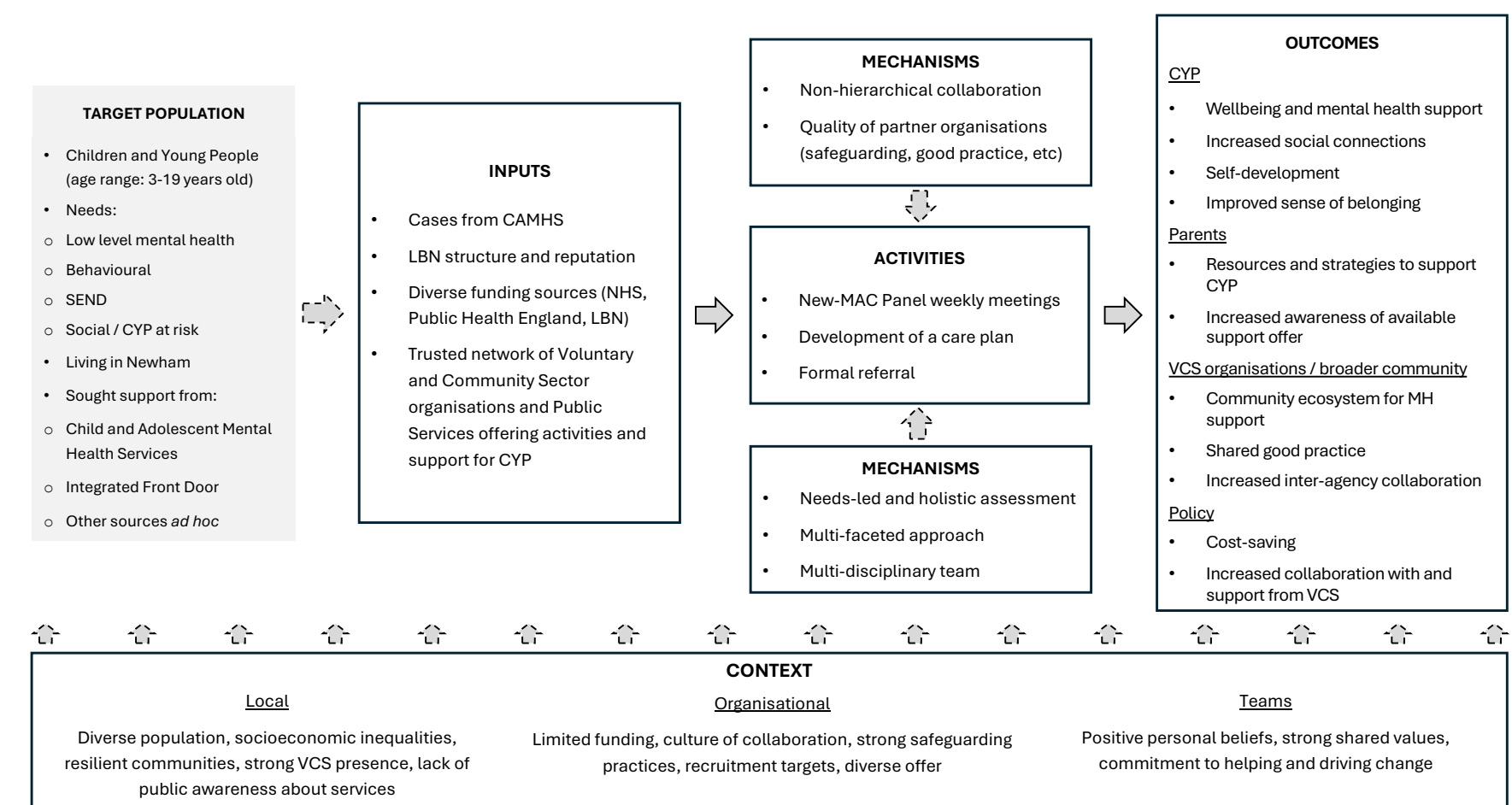

Fig 1. -New-MAC Logic Model

The logic model provides a linear structure that illustrates key resources, activities, and outcomes of the programme. It highlights the role of pre-existing community assets, the integration of different actors, and the mechanisms through which the hub supports CYP. Importantly, it also considers the wider context in which the intervention operates, key for when describing complex interventions[9].

2) What areas require improvement to strengthen this model?

In addition, we identified key areas for further development to ensure effective and timely support for CYP's mental health through the hub approach. These reflect the main challenges currently faced by both VCS partners and government bodies:

- Programme access
- Public awareness and identity
- Sustainable funding
- Process improvements
- Increased support for partner organisations
- Monitoring and evaluation

Conclusion

→ The hub-based social prescribing model shows potential to enhance mental health support for CYP in underserved communities while fostering a multi-sector ecosystem of collaboration.

→ However, close attention is required to factors such as access, funding, and internal processes to ensure effective and sustainable delivery.

→ Evidence from the hub approach highlights alternative models of SP delivery beyond the mainstream NHS Link Worker model, which are underrepresented in current literature.

→ Further evaluation is needed to assess the model's effectiveness and impact, and to inform broader implementation across diverse settings.

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