



## **Funded Interventions Plus Projects – Abstracts & lay summaries**

**Testing the success of an intervention to reduce loneliness and increase wellbeing for young people with mild to moderate mental health problems**

PI: Manuela Barreto

### **Research Abstract**

Transition into young adulthood can result in loss of support networks and experience of new stressors, increasing the risk of loneliness and social isolation, as well as of mental health difficulties, in this demographic group. Young people experiencing mental health issues tend to experience loneliness and social isolation (Wang et al., 2018), and mental health issues and loneliness can perpetuate each other (Ge et al., 2017). The prevalence of and need to address loneliness in young adults, in particular amongst disadvantaged groups who are also at greater risk for early adversity, is gaining attention (Lasgaard et al., 2016; ONS, 2018; Qualter et al., 2015). These issues have been exacerbated by the COVID-19 pandemic (Brooks et al., 2020), making it more important to have effective interventions that address loneliness and mental health.

The Glasgow Association for Mental Health (GAMH) has developed a Young Adult Mental Health (YAMH) group that aims to provide an age-appropriate setting for lonely and isolated young people, typically coming from deprived areas (GAMH, 2019), to cope with mental health difficulties. Informal evidence suggests that YAMH improves both loneliness and mental health by encouraging peer interaction and community participation through sports, arts, culture, skills-based, and mental health prevention activities (GAMH, 2020).

Carried out in partnership with University of Exeter, University of Manchester, and GAMH, the aim of this research is to investigate the effectiveness, feasibility and accessibility of GAMH's community-based peer group programme. The research questions we seek to answer are:

1. Do young people show a reduction in loneliness after taking part in YAMH?
2. Do you people show mental health recovery after taking part in YAMH? And does this relate to reductions in loneliness?
3. What aspects of the YAMH multi-component programme improve loneliness and mental health in young people experiencing mild-moderate mental health difficulties?
4. What facilitates participation in a community peer-group for individuals with mental health difficulties?

### **Methods**

This is a mixed-method investigation, including quantitative measurement to assess the impact of the intervention on loneliness, mental health, and recovery at the start, 4-months into and at the end of the programme (6-months); qualitative interviews with young people to delve into what aspects of the intervention drives positive effects; and a focus group with GAMH workers to understand barriers and facilitators to participation. We will also seek survey feedback from young people who chose not to participate in the intervention to understand why. We will develop research materials and procedures with input from a panel of young advisors, who are already participating in the YAMH group, have collaborated on its development, and whose views have influenced the research questions driving this project.

### **Expected outputs**

We will publish two academic articles and disseminate the work through university press releases. We will create an infographic of key takeaways from engaging young people in the research, to be disseminated on the GAMH website, social media, and newsletters to young adult service users. GAMH will also engage with local stakeholder networks and community events to share research outputs.

### **Plain English Summary**

Young people who experience mental health issues are often lonely and isolated. During transition to adulthood, new changes and challenges may lead to mental health issues and loss of support networks. Loneliness can make it harder to overcome mental health difficulties and these can also be an obstacle to forming social relationships. Supporting young people with mental health issues to overcome loneliness therefore has the potential to improve their mental health and wellbeing. The need to develop effective interventions in loneliness and mental health has never been clearer, in light of the COVID-19 pandemic on worsening loneliness, mental health difficulties and social inequalities.

The Glasgow Association for Mental Health (GAMH) has developed a Young Adult Mental Health (YAMH) group for people aged 16-25 dealing with mild-moderate mental health difficulties, who are often lonely and isolated. The programme aims to provide a setting for peer interaction through activities in the community, ranging from interest-based sports, arts and cultural activities, to wellbeing workshops and practical skills. Informal observations suggest that YAMH encourages community participation and is an important step in recovery.

### **Aims**

Carried out in partnership between University of Exeter, University of Manchester and GAMH, this research will evaluate GAMH's community-based peer-group programme. The specific aims are to: (1) examine how the programme reduces loneliness in young people with existing mental health difficulties, (2) how it benefits mental health recovery and how this relates to reductions in loneliness, (3) explore the specific ways in which the programme addresses loneliness and mental health difficulties, and (4) explore what encourages participation in the community programme, particularly with respect to mental health difficulties and social disadvantage.

### **Methods**

Young people referred to YAMH will be invited to participate in this research. We will collect questionnaire data from those who agree to participate in the programme as well as those who do not: At the start of the programme, midway into the programme, and at the end of the programme

(6-months). For young people who chose not to participate in YAMH, we will additionally enquire about obstacles to participation. We will also interview young people about what aspects of the programme they have benefitted from, and conduct focus groups with GAMH workers on what supports young people to get to participate in the groups.

### **Patient and Participant involvement**

Young people have been involved in the development of the YAMH programme and the research questions driving this project. An advisory panel of young people will continue to shape the development of research materials and procedures. Our principal investigator has lived experience of depression, anxiety, and loneliness in young adulthood and our GAMH co-lead is a young adult with lived experience of loneliness, social isolation, and has experienced the benefits of community involvement on wellbeing.

### **Outputs**

We will produce two academic articles and an infographic of the key lessons we have learnt from engaging young people in the research, to be disseminated on the GAMH website, social media, and at relevant networks and events.

## **What is the feasibility of prescribing community gardening to reduce loneliness and improve wellbeing in individuals with mental health problems?**

PI: Carly Wood

### **Research Abstract**

#### **Rationale and research question**

Loneliness is strongly related to mental ill-health. Community gardening can improve wellbeing via its multiple health-enhancing activities, including social contact, promotion of physical activity and healthy eating; and contact with nature. However, evidence of its impact is largely derived from descriptive data in the general population. Furthermore, the barriers and facilitators to use of community gardening by individuals with mental health problems are not understood. This study will address four research questions:

1. In what ways can community gardening reduce loneliness and improve wellbeing, life satisfaction and connection to nature in individuals with mental health problems?
2. What are the factors that facilitate and prevent the use of community gardening for the treatment of mental health problems?
3. How acceptable, feasible and effective is the community gardening intervention, from multiple perspectives?
4. What is the feasibility of integrating community gardening as a social prescription?

#### **Methods**

Adults aged 18years+ who attend Trust Links' therapeutic gardens for their mental health problem will be invited to take part. Approximately 50% of all garden attendees have a severe mental illness; with 150 regular attendees and an average of five new referrals per week. We will aim to recruit at least 50% of these individuals. Regular attendees will complete a baseline, and 3- and 6-months follow up surveys; whilst new participants will complete an 'entry' and subsequent follow up surveys. 'Exit' surveys will be completed by any participant who opts to leave the gardening project. Surveys will assess participants experience of loneliness (social and emotional) and the relationships made with others, their wellbeing, connection to nature and life satisfaction. Baseline and follow up surveys will also capture duration and frequency of attendance, whilst

'entry' and 'exit' surveys will explore reasons for joining or leaving the project. A subset of survey participants (n=24) will also take part in focus groups; which will further explore the impact of the gardening projects on loneliness, and the barriers and facilitators to accessing and using the garden projects. Interviews will also be conducted with volunteers at the garden sites (n=2 per site), Trust Links staff (n=2); staff operating hub (n=1) and befriending services (n=1), who refer to the projects; and social prescribing link workers (n=2). These interviews will explore the impact of the gardens from a staff/practitioner perspective and the barriers to involvement, uptake and referral to these types of services.

#### **Expected outputs and dissemination**

The applicants will write a blog summarising the findings and present their work at a network event. They will also publish the findings in at least two peer-reviewed journals and develop a recommendation document highlighting key strategies for facilitating uptake and referral to community gardening projects for individuals with mental health problems. This document will be shared widely and be supported by an online training event. Briefing notes will also be shared with key political figures and All-Party Parliamentary Groups; and the investigators will utilise University initiatives and links with councils to influence policy and practice. The investigators will also engage with the media to publicise study findings.

### **Plain English Summary**

#### **Background to the study**

Community gardening can improve wellbeing due to the opportunities it provides for engagement with nature, physical activity, healthy eating, learning and social contact. The multiple health-promoting elements might also make it beneficial for individuals with mental health problems. However, evidence regarding the impact of community gardening in these groups is limited. Identification of the barriers and facilitators to more widespread use of community gardening is also required.

#### **Aims of the research**

1. Explore the impact of community gardening on the experience of loneliness in individuals with mental health problems;
2. Determine the impact of community gardening on the wellbeing, life satisfaction, and connection to nature of individuals with mental health problems;
3. Examine the importance of social interaction to the experienced health outcomes
4. Explore the barriers and facilitators to use and wider prescription of community gardening for individuals with mental health problems.

#### **Design and methods**

Adults aged 18years+ who are attending Trust Links' gardens for their mental health problem will be invited to participate in the research. Participants who already attend the gardens will complete a baseline survey, and a follow-up survey after 3- and 6-months. New participants will complete an 'entry' and follow-up survey(s); whilst any participant who leaves a garden project will complete an 'exit' survey. The surveys will ask participants about their feelings of loneliness, the relationships developed with others; and their wellbeing, connection to nature and life satisfaction. A sample of participants will also take part in group discussions; which will explore the impact of the gardens on experiences of loneliness; and examine the barriers and facilitators to accessing the projects. Interviews will also be conducted with garden volunteers, Trust Links staff, staff operating services which refer to the gardens and social prescribing link workers. The interviews will explore the benefits of gardening projects and the barriers to involvement, uptake and referral.

#### **Outputs**

The applicants will write a blog summarising the findings to the public and present their work at a network event. The findings will also be published in two academic journals and a recommendation

document provided to support the development, use and referral to community gardening projects for individuals with mental health problems. This document will be supported by an online event. A summary of the findings will also be shared with key political groups to influence mental health policy and practice.

### **Patient and public involvement**

Project volunteers, with experience of mental health problems, have been involved in the development of this proposal. These individuals highlighted that the surveys should not be too lengthy or complex and that individuals with mental health problems would feel more comfortable completing surveys and taking part in discussions if they are conducted by someone they have an existing relationship with and whom understands their background. We will therefore train existing project volunteers to distribute the surveys and conduct the focus groups. These project volunteers will also provide feedback on the final survey and focus group questions, and aid in the dissemination of findings.

## **DANCE/CONNECT**

### **Applying the social cure approach: an exploration of whether online group dance can support the social and mental wellbeing of young people living with anxiety.**

PI: Katey Warran

## **Research Abstract**

### **Rationale and research questions**

Anxiety is common amongst young people, with early adulthood considered a time of critical transition connected to the onset of anxiety symptoms (1). Anxiety has been exacerbated by the ongoing COVID-19 pandemic, with young people in general being disproportionately affected and also showing higher levels of loneliness than the general population (see [covidsocialstudy.org/results](https://covidsocialstudy.org/results)). With potential physical distancing and lockdowns ongoing, it is vital that we understand how online interventions can provide support for young people living with anxiety. Within this rationale, the aim of this study is to use an interdisciplinary research approach to explore how an online group dance intervention can foster social connections, reduce loneliness and support the mental wellbeing of young people (aged 16-24) living with anxiety. Underpinned by the 'social cure approach' which theorises that an individual's self-identity is defined in terms of their important group memberships and therefore that developing a new group-based identity can reduce social isolation, loneliness and improve wellbeing (2), this project seeks to develop an understanding of whether online dance participation can improve wellbeing through fostering meaningful social identification. Thus, our research questions ask:

1. Do young people (aged 16-24) living with anxiety experience perceived changes to their social and mental wellbeing as a result of weekly online dance participation?
2. If yes, do participants attribute any of these changes to the co-construction of a group identity, created through these shared online experiences?
3. What are the underlying mechanisms that support these potential improvements to social and mental wellbeing and how are these moderated by the online context?

Therefore, this study will contribute to the limited knowledge-base of whether online dance interventions can support social connections and mental wellbeing through group membership within this population. Not only is this timely due to COVID-19 as it provides critical support for young people, it will also develop theoretical knowledge of the social cure approach within an online context.

## Methods

This is primarily a qualitative, participatory research project that will utilise online focus groups with participatory art and play-based components, as well as participant-led creative journaling and practitioner ethnographic reflections, to understand the complexity of how 8-weeks of online, group dance classes may foster meaningful social identification that can support social and mental wellbeing. Complementing these data, there is a nested quantitative component exploring within-subjects changes in loneliness, mental health and theorised mechanisms of the social cure approach through surveys. It aims to include 36 young people across two different online dance groups.

## Expected outputs and dissemination

The expected outputs of this project include: i) two academic peer-reviewed publications; ii) dissemination of these findings online via the study website, partner organisation websites, and social media platforms; iii) dissemination of an accessible PDF 'toolkit' for how to develop online dance interventions; iv) a public online webinar; and v) sharing participants' creative outputs and reflections via a series of online blogs. As a small-scale exploratory study, this project seeks to serve as groundwork for further larger-scale research.

## Plain English Summary

### Background to the study

A large body of evidence shows that group arts-based activities, including dance, can be beneficial for mental health, particularly as they foster a sense of group belonging, facilitate connection, and enhance wellbeing (3). Since the COVID-19 outbreak, these vital group-level supports have lessened or stopped completely due to physical distancing and lockdown restrictions. However, online arts engagement has burgeoned. For example, our lead partner *Dance Base* (Scotland's National Centre for Dance – see Appendix) offered 275 free online drop-in classes between April-August 2020 which were attended 5,900 times. Due to uptake in online arts-based programmes and as young people living with anxiety have been negatively affected during COVID-19, there is rationale to explore online arts-based programmes which may be beneficial in providing support, such as dance. However, there is little understanding as to whether online dance classes can foster group belonging and group identification, or whether online programmes can improve mental health.

### Aims of the research

This research aims to understand whether 8-weeks of online dance classes can support young people (aged 16-24) who are living with anxiety by providing them with an opportunity to feel a sense of belonging and identification to an online group. It further explores why dance classes may be beneficial, with a specific focus on how a sense of belonging is created and how the classes might improve wellbeing for those who take part.

### Design and methods

The 'social cure approach' is a theoretical framework which suggests that belonging to a group is important for mental health as it enables individuals to feel closer to others. We are applying this theoretical approach within our research, seeking to develop it through an interdisciplinary lens and to explore its efficacy within the context of 8-weeks of online dance classes for young people with anxiety, led by organisation *Dance Base*. We will use focus groups and participatory approaches to work in partnership with young people to creatively explore their feelings in relation

to their membership of the group and its effects on social and mental wellbeing. In addition, self-report surveys using validated measures of loneliness, anxiety, wellbeing, and group identity will track changes in the participants' experiences and identify mechanisms linking group dance to potential changes in loneliness and anxiety.

### **Outputs**

We plan to publish two peer-reviewed academic articles, as well as utilise our online platforms such as partner websites and social media to share results and a PDF toolkit for how to develop online dance projects. Additionally, we will encourage the young people to share their experiences on the project blog, and coordinate a public, online webinar to share findings.

### **Patient and public involvement**

We will establish an Intergenerational Advisory Committee to collaboratively support and actively contribute to the research process. Young people with anxiety will play an active role in co-production and decision-making for this project, including, but not limited to, deciding on the genre of dance, designing research methods, and engaging in participatory data analysis and knowledge dissemination.

## **Songs from Home: Developing and testing an online songwriting intervention to tackle loneliness and enhance social connections in order to reduce symptoms of postnatal depression**

PI: George Waddell

### **Research Abstract**

#### **Rationale and research question**

Poor social connections, including loneliness, are a risk factor for maternal mental illness. This is important as suicide is the leading cause of mortality in the first year after women give birth. Indeed, in the UK up to one in eight women will experience postnatal depression (PND), a debilitating illness for mothers with repercussions for fathers, mother-baby bond, and infants' social-emotional development. Low or lacking social support is a risk factor for PND, and women with PND often describe feelings of loneliness and social isolation.

While there are treatments available for PND, there is low adherence to antidepressant medication and unacceptably long waiting lists for psychological therapies. Moreover, there are few treatments aimed at preventing or reducing loneliness specifically among this group, particularly for women that – for financial, social, practical, or health barriers including COVID-19 – are unable to attend in-person treatments. Nonetheless, previous research conducted by the team has shown that music interventions can support social connections and mother-baby bond as well as reducing symptoms of PND. Building on this, this proposal aims to develop and test an *online* music intervention based on songwriting, with the aim of reducing loneliness and enhancing social connections through musical interactions in order to reduce symptoms of PND. Songwriting has been used in a variety of clinical and online settings, and is particularly appropriate in this context because it allows people to participate in a variety of musical, creative, and social ways.

Specifically, we address one overarching research question: how can an online, expert-led collaborative songwriting intervention tackle loneliness and support social connections in order to reduce symptoms of PND?



## Methods

The project will be built upon a methodology of co-creation, encompassing four overlapping components all of which have lived experience at the core: DISCOVERY, with women, of their needs and challenges; DEFINITION of a specific approach to the online songwriting intervention that meets those needs; DEVELOPMENT of that intervention; and DELIVERY of a randomised controlled trial (RCT) that evaluates its efficacy.

*Songs from Home* will incorporate these components over three phases informed by lived experience perspectives, culminating in a two-armed RCT with a non-intervention wait-list control group. The RCT will test the impact of the newly developed intervention on a primary outcome measure of loneliness (UCLA 3-item scale) and secondary outcome measures of social connectedness and PND, with embedded qualitative descriptions of mothers' experiences.

## Expected outputs and dissemination

*Songs from Home* will result in a tested intervention with the potential for further refinement and wide-scale adoption. Outputs will be three-fold: (1) qualitative and quantitative results of the research, as well as description of the nature of the intervention and its design, will be disseminated through peer-reviewed publications in high-impact academic journals and conferences; (2) a short film of 3-4 minutes in length will be professionally produced using an established collaborator documenting the process and results of designing, implementing, and researching the intervention; (3) a large-scale funding application will be developed for scale-up and implementation of the intervention.

## Plain English Summary

### Background to the study

Feeling lonely increases the chance for mental illness among mothers. Factors that affect mothers' mental health require urgent attention because suicide is the leading cause of death among women with children under the age of 1 year. In the UK up to one in eight women experience postnatal depression (PND). This debilitating illness for mothers has implications for the fathers, babies, and mother-baby relationships. If women have low social support, this increases their chances of PND. Women with PND often describe feelings of isolation and loneliness.

While treatments are available for PND, alternatives are urgently needed; people often don't take their antidepressants as prescribed and long waiting lists mean lack of access to psychological therapies. Treatments for loneliness are even more difficult to come by especially for women who – for financial, social, practical, or health barriers including COVID-19 – cannot attend in-person care. Promisingly, previous research conducted by the team showed that music interventions can support social connections and mother-baby bond, and reduce symptoms of PND.

### Aims of the research

The aim of this project is to develop and test an *online* music intervention based on songwriting, which has the goals of tackling loneliness and enhancing social connections through musical interactions in order to reduce symptoms of PND. Songwriting has been used in a range of clinical and online settings and fits well in an online context because it allows participants to join in in a range of musical, creative, and social ways. Specifically, we address one overarching question: how can a collaborative online songwriting intervention which is accessible from home and led by an expert tackle loneliness and support social connections in order to reduce symptoms of PND?



## Design and methods

Using four components the project will be developed with women who have experienced loneliness and PND as well as with musicians and professionals who have worked with them: (1) discovering, with women, their needs and challenges, (2) defining how the songwriting intervention will best support women to meet those needs, (3) delivering the songwriting intervention in ways that are accessible to a wide range of women, and (4) running an experiment to determine whether the songwriting intervention is effective.

## Outputs

*Songs from Home* will result in a tested intervention that can be further refined and scaled up. There will be three output types: (1) peer-reviewed academic journals and conference presentations will describe experiences and numeric outcomes on standard scales, as well as description of the nature of the intervention and its design; (2) a 3-4 minute film will be professionally produced documenting the process and results of designing, implementing, and evaluating the intervention; (3) a large-scale funding application will be developed for scale-up and implementation of the intervention.

## Patient and public involvement

Women who have experienced loneliness and PND will guide the development and testing of *Songs from Home*. The team has a patient and public involvement lead and comprises multiple people with lived experience perspectives who will also inform the study design and conduct.

## #KindnessByPost: a mixed methods investigation of an innovative participatory public health programme

PI: Luke Sheridan Rains

## Research Abstract

### Rationale and research question

#KindnessByPost (KbP) is an initiative by the Mental Health Collective in which people volunteer to create, send, and receive a card with a message of goodwill to someone else also taking part, and have someone allocated to send a card to them. The aim of KbP is to increase people's feelings of connection with others and improve their wellbeing. So far, it has been organised for periods of increased isolation, stress, or loneliness, such as Valentine's day and during the recent lockdown. A previous evaluation indicated benefits to people's wellbeing, loneliness, hope, and belonging, in keeping with wider evidence of the benefits of acts of kindness and of creativity for wellbeing. Unlike most professionally delivered interventions for improving wellbeing, KbP is inexpensive to administer, accessible, and potentially highly scalable. A richer understanding of this promising participatory public health programme is needed to inform a future definitive trial of whether a reciprocal message of kindness received by post can contribute to the wellbeing of a person with mental health challenges in a measurable way. Our project will develop a programme theory for KbP, establish its costs, and explore its short- and medium-term impact on loneliness and wellbeing.

### Methods

We propose a mixed methods study of three work packages: Firstly, a quantitative package will measure the impact of the KbP intervention on peoples' feelings of loneliness and wellbeing using a pre-post design with baseline (time of induction into the KbP event), intervention end, and 3-month follow-up data collection. Secondly, a cost analysis will be performed to evaluate the cost to the Mental Health Collective of providing the intervention, and to explore any possible cost

impact in terms of health care resource use. Data for the quantitative and health economics packages will be primarily collected using an online survey integrated into the KbP online platform and from the Mental Health Collective's executive team. Quantitative data will be analysed using regression modelling or other appropriate statistical methods.

Thirdly, we will use realist interviews with programme providers and participants (n=20) to explore key contextual factors influencing experience and delivery of the programme and its mechanisms of effect, in order to iteratively develop a programme theory for KbP.

We propose to align data collection with two KbP events planned for February and June 2021. Quantitative and economic data collection will be completed by October. Qualitative data will be collected between March and July.

### **Expected outputs and dissemination**

Results from this study will be published in peer-reviewed scientific journals and promoted through appropriate channels. These include relevant organisational websites, social media, radio, newspaper, podcasts and broadcast media, and dissemination events for mental health research, policy, and practice communities. The study findings will be of immediate value in refining and targeting forthcoming KbP events, as well as improving guidance for commissioners of social prescribing interventions, and the signposting of social prescribing options. It will also establish the need for and inform a future definitive randomised controlled trial of the intervention.

### **Plain English Summary**

#### **Background and Aims**

#KindnessbyPost (KbP) is an initiative in which people send and receive messages of goodwill to a stranger by post. People who have taken part in previous KbP events say that the experience of receiving a card – a handwritten object that can be held and treasured – is powerful in ways that cannot be matched by online communications. Many also say that the experience of making a card, and focusing on writing an encouraging message for someone else, has offered a sense of empowerment at a time when so much is beyond their control. It is a project that is open to all, but may be particularly relevant to communities most affected by Covid-19, such as those with mental ill health, who are facing the challenge of loneliness and isolation more starkly than others. Professionally delivered help to tackle loneliness and isolation costs a lot and doesn't reach everyone who might benefit. KbP is an exciting new project which is inexpensive, and easy to run and take part in. Understanding how the programme works and for whom, and what the costs and benefits are is of substantial interest.

Previous feedback indicates that KbP may help people feel better and less lonely. We want to evaluate KbP more robustly, including collecting follow-up data from a larger proportion of participants, exploring whether any benefits are sustained over time, and by calculating the costs of the programme. We also plan to use 'realist interviews' (a type of research for exploring complex social interventions) to develop a theory of how KbP works, for whom, and in what circumstances.

#### **Design and Methods**

We will do our study alongside two KbP exchanges planned for 2021. When people sign up for the events, we will ask them if they would like to take part in our study by completing an online survey that will measure wellbeing, loneliness, belonging, and use of health services. We will collect this information at three timepoints: when they sign up, immediately after the exchange, and three months later. We will use the data to explore the psychological benefits of KbP and how much it costs to achieve them. Secondly, we will interview the KbP team and 20 people taking part in KbP to develop a theory of how it works. Two of the study team have lived experience of severe and

enduring mental illness and we have budgeted for four additional researchers with personal experience of mental ill health, who will contribute to the study throughout.

### **Outputs**

We will write up the study in academic journals and share our findings widely, including through websites, social media and talking at events on mental health research, policy and, practice. Our study will help the KbP team secure funding for future exchanges and learn about how to organise them to be as helpful as possible. It will also pave the way for a future, bigger research study, a “randomised controlled trial”, which can show beyond doubt whether and how much KbP helps people.

## **Loneliness, mental health and wellbeing: an acceptability and feasibility study of UK Men’s Shed.**

PI: Bryony Porter

### **Research Abstract**

#### **Rationale and research question**

Over 1 million older adults are chronically lonely. Loneliness is associated with a range of negative physical and mental health outcomes. The UK government has invested in social prescribing schemes to tackle loneliness and its associated health impacts. Social prescribing refers people with health problems into community-based support and initiatives to enable group and peer support.

Men’s Sheds are one example of a community organisation with involvement in social prescribing and has an overarching aim to tackle loneliness. The Sheds aim to bring people together, to tackle loneliness through ‘making environments’, where men (and women) come together in a social space, doing practical activities (e.g. woodwork).

In this proposal we aim to understand the role that peer support and community-driven initiatives play in reducing loneliness and supporting mental health and wellbeing. Working closely with Men’s Sheds, we propose a pilot feasibility study to achieve this aim.

The research questions are:

- 1) What is acceptable and feasible in terms of evaluating the mental health, loneliness and social isolation of members of Men’s Sheds (Shedders)?
- 2) What impact does being referred (e.g. through ‘social prescribing’) have on individual experiences within the Shed?
- 3) What are the mechanisms, processes and relationships associated with mental health outcomes of Shedders?

We co-produced the proposal with a Shed user (Shedder) and UK Men’s Shed Association (UKMSA). In preparation, we consulted 47 Shedders and the Men’s Shed Health and Wellbeing Committee. This vital work has shaped the proposal, project and dissemination plans.

#### **Methods**

Mixed methods to test the acceptability and feasibility of measuring loneliness, mental health and wellbeing in Sheds. We will use acceptability questionnaires, outcome measures (loneliness, mental health and wellbeing) measured at baseline and 3-months and follow-up interviews to fully understand acceptability and explore the role of social prescribing and referral processes into Sheds.

## Expected outputs and dissemination

The expected outputs from this project are:

- An in-depth understanding of acceptability and feasibility of loneliness, mental health and wellbeing measures in Men's Shed.
- A refined logic model understanding the mechanisms and processes of Sheds.
- A list of specific recommendations for UKMSA.
- New knowledge on who attends Sheds, motivation for attending, potential benefits, pathways of benefits, who this approach may or may not work for and important information to decide whether to lead to a larger scale project.

We consulted the UKMSA and Shedders and will work with them to fully develop our dissemination strategy.

Dissemination plan:

- Video and infographic designed with UKMSA and Shedders to share findings, narratives and stories of Shedders
- Online workshop with Shed ambassadors to discuss the findings and collectively develop key recommendations.
- Presentation of findings at UKMSA conference
- Presentation of findings to Men's Shed Health and Wellbeing Committee
- Publication of findings in peer-reviewed, open-access journal
- Blog post for the online blog for the Mental Health Elf
- Findings and publication shared through NIHR ARC East of England, University of East Anglia School of Health Sciences social media channels and networks.

## Plain English Summary

### Background to the study

Many older adults report that they are lonely. Loneliness and social isolation can have long-term, negative effects on day-to-day life. Being lonely and socially isolated impacts physical health with links to conditions like heart disease, stroke and long-term pain and mental health, including depression and anxiety can also be impacted.

To tackle loneliness the government invested over £4.5 million into 'social prescribing' schemes across England. Social prescribing connects a person with a health problem to community-based support. For example, social prescribing could offer a 'prescribed' local community group for exercise (e.g. walking or gardening group) to reduce high blood pressure, offering support with physical activity. Social prescribing schemes aim to bring people together, to support each other, assisting with physical and mental health problems, loneliness and isolation.

Men's Sheds are an example of a community organisation that aims to reduce loneliness and isolation. Some are already involved in social prescribing schemes across England. There are over 600 Shed's in the UK and many more globally. Sheds are 'making environments' where men (and women) (Shedders), come together in a social space, doing practical activities (e.g. woodwork). Shedders share activities, skills and knowledge, friendships develop, and mutual support is offered that can by default help with physical, mental and social aspects of health.

### Aims of the research

We co-created the proposal with a Shedder and UK Men's Shed Association (UKMSA). We also asked 47 Shedders and the Men's Shed Health and Wellbeing Committee for their feedback. In partnership with the UK Men's Sheds this project aims to exemplify and understand the role that peer support and community-driven initiatives can play in reducing loneliness and isolation, prevent and support mental health amongst Shedders.

### **Design and methods**

This study will test ways of measuring how being part of a Shed affects feelings of loneliness, mental health and wellbeing.

We will include a small group of Sheds from different areas across England. Shedders will complete a questionnaire about themselves, their Shed and levels of loneliness, mental health and wellbeing. Three months after the first measure, Shedders loneliness, mental health and wellbeing will be measured again. A smaller group of Shedders will also be interviewed for deeper understanding about their experience in Sheds, the way they have been referred to the Sheds (e.g. social prescribing) and the measurement tools.

### **Outputs**

Working with Shedders, we will create a video and an information poster. We will present our findings to Shedders and publish in an open-access peer-reviewed journal. We will write a blog for the Mental Health Elf and share the project across our professional networks and social media outlets.

### **Patient and public involvement**

A Shed leader and the UK Men's Sheds Association are co-applicants. Our proposal has been reviewed by the Men's Shed Health and Wellbeing committee (volunteer Shed members) and we have virtually consulted 47 Shedders from across the UK, who support the project, shape this proposal and will be consulted throughout the project.