

National Institute forHealth and Care Research

Developing a poveRty-informEd learning health and social care system to PRevent mEntal health problemS in disadvantagEd childreN and parenTs (REPRESENT): a focus on young carers

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Background: Children who have a caring role for a family member because of illness, disability, mental illness or substance use are more likely than their peers to experience poverty (Vizard et al.,2019). Children and parents living in situations of poverty and social disadvantage experience poor mental health. The negative impact of these experiences is acute, and the effects continue into adulthood. Young carers were found to report increased rates of depression, anxiety, self-harm and feelings of wanting to end their life (All-Party Parliamentary Group for Young Carers & Young Adult Carers 2023). Yet despite experiencing the greatest mental health related need, children and families living in poverty rarely have their mental health needs recognised and do not receive effective prevention and treatment.

Aim of the study: The REPRESENT study is an ongoing study that aims to develop a poverty-informed health and social care system for children/families at risk of mental health problems. This poster will focus upon the methods of an ongoing study that will understand the needs of young carers who experience financial hardship and insecurity and how the system can better respond to their mental health needs and emotional well-being.

Research methods

This is a multi-component study, underpinned by a realist approach and includes young carers age 15-18 as public contributors. Across 4 stages: social network analysis, realist evaluation, qualitative comparative analysis and a discrete choice experiment will;

Identify the formal support young carers and parents/caregivers receive from practitioners and the value they place upon it. Young carers (n=20) and parents/caregivers (n=20) in Northeast England & North Cumbria will be recruited from April – September 2025. **Social network analysis** will map the formal support accessed by young carers and families using a Social Network Analysis (SNA) approach. SNA maps and measures the strength of relationships between people and organisations. Participants will be asked to identify sources of support they have contact with and examine this visually by drawing maps to identify their sphere of influence.

Evaluate the support young carers (n=20) and their parents/caregivers (n=20) receive to understand how and for who interventions have an impact. **Realist interviews** will examine the contextual, mechanistic factors and observable outcomes of the 'valued care' linked to support provided by practitioners identified in the sphere of influence. Programme theories will be refined to explain what works to prevent mental health problems in young carers and their parents/caregivers in the context of financial hardship and insecurity, in what circumstance, how and why.

Test theories of support for young carers and their families with practitioners who provide support. **Qualitative comparative analysis** will be used to ask practitioners to identify a small number of young carers they have recently/currently supported who have achieved positive, measurable outcomes and those they consider have not. QCA is used to explore complex causality, by investigating which combinations of conditions are more often found in effective (and non-effective) interventions.

Understand from young carers, their families and the practitioners who support them in

Discrete choice experiment will assess preferences and acceptability for a poverty-informed integrated health and social care system that meets the needs of young carers. They use hypothetical questionnaires to estimate

their caring role, what they consider the core components of an effective intervention to improve their mental health to be.

the strength of preferences for individual intervention characteristics in circumstances when it is not possible to observe actual choices. These characteristics suggest preferences that are likely to be preferred and therefore support implementation of an intervention.

References

Vizard, P., Obolenskaya, P. and Burchardt, T., 2019. Child poverty amongst young carers in the UK: prevalence and trends in the wake of the financial crisis, economic downturn and onset of austerity. Child Indicators Research, 12, pp.1831-1854.

All-Party Parliamentary Group for Young Carers & Young Adult Carers Trust (2023). INQUIRY INTO THE LIFE OPPORTUNITIES OF YOUNG CARERS AND YOUNG ADULT CARERS written evidence submitted by the Carers Trust citing research from NHS Digital (2018) Mental Health of Children and Young People in England, 2017. Accessed at: Mental Health of Children and Young People in England, 2017. Accessed at: Mental Health of Children and Young People in England, 2017.



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