

Space to thrive

The role of community spaces in supporting the mental health and wellbeing of children and young people

March 2023



Contents

Executive summary	03
<hr/>	
1. Introduction	06
<hr/>	
2. Research methodology	08
<hr/>	
3. Research findings	10
The role and offer of community spaces	11
Open-access provision	12
Specialist provision	14
The impact of community spaces, activities, and provision the mental health and wellbeing of children and young people	15
Measuring impact	15
Impact on risk and protective factors	15
Challenges facing community organisations in providing spaces, services, and activities for young people	17
Finances and funding	17
Increased demand	17
Workforce issues - hiring, training, and retaining staff	17
A lack of awareness	18
Community organisations used as “waiting rooms” for CAMHS	18
A lack of appropriate community spaces	18
Systemic barriers facing marginalised communities	18
<hr/>	
4. Conclusion	20
<hr/>	
5. Recommendations	22
Resourcing community organisations	23
Culture change and collaboration	23
Workforce development	24
National policy priorities and development	25
<hr/>	
Appendix 1: Research methodology	26
<hr/>	
Appendix 2: Influences on CYP mental health and wellbeing	27
<hr/>	
End notes	28
<hr/>	

Executive summary

Community spaces play a vital role in supporting the mental health and wellbeing of children and young people (CYP). There is growing evidence that loneliness, isolation and weakened social networks are decreasing life satisfaction and confidence of this group. The Covid-19 pandemic has had a particular impact on CYP in this area. This report highlights the distinctive role community spaces can play to address these challenges and proactively support good mental health and wellbeing for CYP.

We undertook a literature review, a survey of community organisations, in-depth interviews with community leaders, and roundtables with Voluntary, Community and Social Enterprise (VCSE) and public sector partners. We also sense-checked our research with young people involved in community provision. Through this, we explored how community spaces support the mental health and wellbeing of CYP. Specifically:

- The role of community spaces and what they offer
- The impact of community spaces, activities, and provision on CYP mental health and wellbeing
- The challenges facing community organisations as they provide spaces and services for CYP



Key findings

Our research uncovered the following:

- **Community spaces which support CYP mental health and wellbeing come in all shapes and sizes**, from multi-purpose community hubs to youth centres, sports and leisure facilities, green spaces, and online spaces.
- **Community spaces are critical in supporting the mental health and wellbeing of CYP and communities** – through both informal “open-access” and commissioned “specialist” provision.
- **Demand for both “open access” and “specialist” provision is increasing**, with community organisations describing being inundated with referrals from the public sector.
- **Community spaces offer a low or no-cost, depressurised, safe and relaxed “third space” for CYP away from school and home life.** Such spaces, and the services and activities they provide, contribute to many positive outcomes and can also help to reduce the risk factors which can impact CYP mental health and wellbeing.
- **Community spaces create positive impact**, including: increased social connection, sense of belonging and pride in place, knowledge and skills, physical activity and wellbeing and resilience, improved relationships with other young people or family, reduced isolation and loneliness, and reduced demand for acute mental health services.
- **Despite the benefits, community organisations are facing challenges on many fronts in sustaining community spaces**, including: a lack of sustainable funding, increased demand, workforce issues, a lack of awareness, use as “waiting rooms” for public sector services, and a lack of available community spaces for CYP.

Key recommendations

The following policy and practice recommendations are aimed at a range of organisations and professionals across the local and national statutory and VCSE sectors.

There are ten recommendations falling under four themes aimed at addressing the challenges discussed in this report. They also seek to optimise the positive impact that community spaces can have in improving CYP mental health and wellbeing.

All of these recommendations require a mindset that values and invests in the preventative work led by community organisations and the spaces they work within.

Resourcing community organisations

- 1 **Take opportunities to support community ownership of assets.** Local authorities (LAs) and estates teams at a system and place level within Integrated Care Systems (ICSs) should actively support Community Asset Transfer to get underused spaces into community hands. This can help to put it to active use in promoting CYP wellbeing.

ICS Local authority

- 2 **Provide sustainable long-term funding.** Integrated Care Boards (ICBs) and LAs should consider how they can best support community organisations and spaces to be sustainable in the long term. This means moving away from short term, project-based funding to core, multi-year funding, and ensuring existing contracts are updated in line with inflation.

ICS Local authority

Culture change and collaboration

- 3 Commission services collaboratively**, to level the playing field across providers and maximise the potential of community organisations to participate in local service provision.

ICS Local authority

- 4 Ensure appropriate representation from the VCSE sector on strategic health system fora.** This will allow community organisations to shape the direction of travel at neighborhood, place and system levels within Primary Care Networks (PCNs), ICSs and relevant LA partnerships, thereby building parity of esteem with statutory bodies.

ICS Local authority PCN

- 5 Agree common measures of impact across sectors** so that evidence and the means for collecting and reporting on impact data is consistent. There is a particular role for impact data leads within relevant central government bodies (eg, Office for Health Improvement and Disparities (OHID), Department of Health and Social Care (DHSC), NHS England (NHSE), Department for Culture, Media and Sport (DCMS) and Department for Levelling Up, Housing and Communities (DLUHC)) and VCSE leaders.

National ICS Local authority

Workforce development

- 6 Develop a shared understanding of referral pathways between sectors** to develop public sector awareness of VCSE sector provision and develop VCSE sector knowledge and skills. ICBs and LAs should work collaboratively with community organisations to build this understanding.

ICS Local authority VCSE

- 7 Encourage better use of the Local Authority SEND Local Offer** for CYP with special educational needs and disabilities aged 0-25. This should aim to develop awareness of local provision and community spaces amongst those in primary care, school settings, and other parts of the mental health and wellbeing support system.

Local authority

- 8 Co-locate clinical and community services** to improve understanding and collaboration between the two around prevention support work for CYP health and wellbeing.

ICS Local authority PCN VCSE

- 9 Champion youth work** by supporting the National Youth Agency (NYA) to develop training and qualifications for youth and community workers. ICSs and LAs should work with the NYA and other partners to offer training for individuals working with CYP in community settings.

National Local authority ICS

National policy priorities and development

- 10 Progress existing policy opportunities to support local communities**, such as the Shared Prosperity Fund, the Levelling Up Fund and procurement reform.¹

National

1.

Introduction



Loneliness, isolation and weakened social networks are increasingly important factors in reducing life satisfaction and confidence in children and young people (CYP).² The demand for mental health and wellbeing support for CYP has increased in recent years, with a concurrent increase in the prevalence of mental disorders among this group.

This is a trend which has been seen over several years,³ but has also been exacerbated by the Covid-19 pandemic as young people have missed out on opportunities to socialise with their peers outside of educational settings. The 2022 NatWest Youth Index shows the decline in young people's happiness and confidence when it comes to areas such as relationships with friends, their community and local area and emotional health.⁴

The Thrive model for the Child and Adolescent Mental Health Service (CAMHS) describes different categories of mental health needs among CYP. At the centre of the model is the state of "thriving" and an expectation that community and public health focussed interventions help drive prevention and promotion, thereby building and maintaining population mental wellbeing.⁵

Many factors affect the mental health and wellbeing of CYP,⁶ including community factors which play a central role alongside those operating at an individual, family, and structural level.

Community organisations and their work in community spaces are a vital part of the wider ecosystem supporting the holistic mental health

and wellbeing needs of CYP. The work that happens in community spaces tends to take a preventative approach by helping to reduce the risk factors that negatively impact mental health and wellbeing. It does so while also building and reinforcing the protective factors which positively influence it.

These spaces, activities, and services provided by community organisations are proactive in helping CYP to thrive rather than acting as a triage for those with the greatest need. They have a wide range of impact, from helping to reduce isolation and loneliness to teaching new skills. They help to tackle the social issues impacting on CYP lives as well as their mental, physical, social, and emotional needs.



The importance of community spaces is being increasingly recognised. A key part of the government's levelling up agenda is the focus on social infrastructure, evidenced by the

creation of the £150m Community Ownership Fund and the priorities set by the UK Shared Prosperity Fund. The Levelling Up White Paper set out plans for a national Community Spaces and Relationships strategy, further highlighting the importance of community spaces. The evidence base around the role of community spaces supporting social relations, community cohesion, increasing knowledge and skills has also continued to grow in recent years.⁷

We hope that this report is a valuable addition to this evidence base. ■

2.

Research methodology



Our research has focused on three key questions:

- What are community spaces, and what do they offer?
- What outcomes do community spaces contribute to for CYP?
- What challenges do community organisations face in delivering community spaces, services, and activities?

To answer these questions, we conducted research using the following methods:

- a literature review.
- an England-wide survey of community organisations.
- in-depth interviews with community leaders running services and activities in community spaces.
- roundtables with VCSE and public sector partners.
- a process of sense-checking the research findings with a group of young people involved in community provision.

Appendix 1 on page 26 provides more detail on the research methodology and participants. ■



3.

Research findings



The role and offer of community spaces

Community spaces come in all shapes and sizes, from multi-purpose community hubs, sometimes co-located with public sector services, to youth centres, swimming pools and parks. There are also a growing number of online spaces provided community organisations which support CYP mental health and wellbeing.

Case study - Bradford Organic Communities Service Ltd (BOCS)

BOCS is a community organisation operating in inner-city Bradford but serving the wider area. Much of their provision for young people is for 18-25 year-olds, including some work experience. BOCS has several different community spaces including Bradford Community RePaint, a busy paint recycling workshop and shop. BOCS also have a large community garden which plays host to many activities including projects specifically for young people. Being at the centre of the city is a vital part of their offer, as is the ability to host young people in a large, open green space in which mental health and wellbeing support is offered in a safe and relaxing setting.



Almost every community leader surveyed (96 per cent) said that community spaces were important or very important in supporting the mental health and wellbeing of CYP in their communities. Furthermore, they said that demand was increasing:

- 79 per cent of community leaders had observed the mental health and wellbeing of CYP worsen or significantly worsen since the beginning of 2020.
- 87 per cent of community leaders had seen demand for their provision for young people increase or significantly increase.

Our survey respondents cited the importance of the low or no-cost nature of community spaces for CYP, alongside being an alternative and often more relaxed setting for young people when compared to school and home life:

“Community spaces alleviate isolation and offer a positive environment for young people to interact with activities and other young people.”

“We are outside of statutory provision. People choose to come to us, they are not sent, there is no stigma.”

“We are a safe space for so many children and young people. We are, for many, the “trusted adult” in their lives.”

Case study – Ykids, Bootle, Merseyside

Ykids provide spaces and services for young people and their families, empowering young people to ‘make change, be change and champion change’.

They provide mentoring in schools, run 10-15 children’s groups a week, provide mentoring for parents, plus other work with families.



Ykids use several community spaces including a youth centre, a refurbished library leased to them by the local council and a host of buildings belonging to others in the community such as the school and local church.

They also run a Victorian Steampunk bookshop in the local shopping centre, providing a safe space and fun environment for young people.

The organisations which own and operate from these spaces also provide a huge range of services which fit broadly into two categories:

- **Open access provision:** those activities and spaces which are open to any young person.
- **Specialist provision:** those activities and spaces which are specifically tailored and offered to CYP with certain lived experience – for example, provision for young carers or for young refugees and asylum seekers. There can also be culturally tailored provision, provision based on gender, sexuality, or ethnicity.

Open-access provision

Open-access provision is for any young person and the most informal type of support available. The mental health professionals we heard from were unequivocal in stating the importance of open-access provision in supporting CYP.

Community organisations surveyed for this work mentioned a huge range of activities which they provide for CYP in community spaces. These included:

- Arts and craft activities
- Sports and physical activity (from football to yoga)
- Cooking and healthy eating classes
- Day trips and residentials
- More formal youth clubs
- Education (eg, help with homework, career, and education advice)
- Music, arts, theatre, and dance

These organisations also provide a relaxed, neutral, and depressurised “third space” for young people that isn’t school or home.⁸ This enables young people to be themselves and build confidence and relationships, and communicate with trusted adults and peers without fear of the stigma they may experience in some other settings. Our interviewees said:

“Community spaces offer a place of psychological safety, where there is open-access provision. They are also a space of expression and choice.”

“There is a lot of anxiety in the young people we work with... We provide them with a space in which they know they are safe.”

High quality, professional staff are vital to the outcomes CYP experience through their interactions with community spaces. Community spaces would not be able to operate without these staff, including trained youth workers. Many organisations we heard from also highlighted the importance of open access settings providing CYP with access to a counsellor and/or talking therapies.

Our research highlighted some community organisations in which CYP have a say in how community spaces operate, building a sense of ownership and upskilling young people. This is a vital part of building up a workforce in this area for the future as the number of youth workers continues to fall.⁹

Case study - The Winchester Project (The Winch), Camden, London

The Winch provides a "cradle-to-community" approach to working with young people up to the age of 25, and sometimes beyond.

They provide open-access and targeted support for young people and their families, helping to tackle social issues impacting young people and giving ongoing support for their mental health and wellbeing.



The Winch is based in a former derelict pub, now repurposed as a youth centre. The Winch runs a community library (in a separate building), maker space, and recording studio. It also provides space for groups providing dedicated support for particular demographic groups.

The Chief Executive of The Winch explains that "Young people need a depressurised space where they are not expected to behave in a certain way (as they are in schools)... for some young people, schools are a place of harm".

Case study - CATCH, Leeds.

CATCH or 'Community Action to Create Hope' was founded over a decade ago turning an unusable and derelict piece of land in Harehills, Leeds, into what is now a thriving community hub. Their open-access provision and the spaces which they provide are specifically tailored to provide a community space in which young people have the ability to learn, grow and thrive. Their missions include aims to create positive futures for CYP in the area, to provide volunteering and social action opportunities and to promote togetherness, unity and acceptance.



CATCH provides spaces in which young people can attend sessions with young people of their own age, can develop healthy relationships with trusted adults and other young people and can access support when needed. Furthermore, at CATCH young people are at the heart of decision-making. They lead activities and sessions for younger members, help to run the on-site café and help to make decisions about the use of the space.

Young people who leading activities at CATCH emphasised the importance of community spaces in supporting mental health. They value the importance of having a safe space in which to meet friends and value the youth-led aspect of CATCH. They felt that there were many positives to having the volunteering roles for young people which could help to break down stigma around mental health as younger attendees can speak more easily to young people closer to their own age.

Specialist provision

Many community organisations provide specialist services targeted at specific groups of CYP alongside open-access provision. Others solely deliver specialist services from community spaces.

Specialist provision often takes the form of talking therapies, including one-to-one and group counselling sessions and mentoring. Unlike the more ongoing nature of open-access provision, specialist services contracts tend to require community organisations to report on specific outcomes for young people, often over a very short period. This reflects the fact that specialist services tend to be funded by targeted, specific pots of money, each with their own targets and desired outcomes.

Specialist provision can help to support the mental health and wellbeing of CYP needing a greater level of support than open-access provision can provide. It also supports those who may have certain lived experiences or be part of communities experiencing significant disadvantage. This might include the LGBTQIA+ community, migrant and refugee young people, young carers, and many other groups.

The majority of community organisations we surveyed provided some kind of specialist support for an inclusion health group.¹⁰

“Across all our work, the foundation is always wellbeing, supporting and improving the wellbeing of young people... We have a lot of provision for LGBT youth, it takes place in an environment where they will not feel the ostracisation they may experience in other environments such as schools.”

The “open access” and “specialist” categories are not mutually exclusive; often community organisations will provide both types of services for CYP. Those we spoke to stressed that community spaces themselves are non-segregated spaces in which young people can interact with their peers from all backgrounds.

Case study - St. George's Community Centre, Lupset, Wakefield

St. George's is located on the Lupset Estate in Wakefield, in one of the 10 per cent most deprived postcodes in the country. The Centre has a vast array of provision for children and young people, including a range of open-access provision. This includes their Youth Café, an informal drop-in for 13-18 year-olds offering a warm space, a hot snack, Wi-Fi, signposting to support, and staff on hand.

Detached youth work sessions are delivered in the local park and the team room has been converted into a “connect café”. This enables those without access to Wi-Fi or technology to get online. All on-site sessions are free and run termly, complimented by a full range of school holiday programmes.



One staff member explains, “We are based on an estate considered to be disadvantaged and many of our attenders are living in poverty. We pride ourselves on being accessible and representative for all members of our community”.

Their team includes staff who are LGBTQIA+, have a physical disability, have a learning disability, were migrant children, have experience of the care system, and/or were young carers. This, they state, “enables us to be open and proud and visible to our young people as role models.”

None of St. George's activity would be able to happen without their safe community spaces.

The impact of community spaces, activities, and provision for CYP and their mental health and wellbeing

There are many factors which contribute to, or detract from, the mental health and wellbeing of CYP. Community spaces, and the services and activities they provide, contribute to many positive outcomes, and can also help to reduce the risk factors which can impact CYP mental health and wellbeing.

Measuring impact

The overwhelming majority (87 per cent) of community organisations we surveyed measure the impact of their provision on the CYP that they worked with. However, the way in which this impact was measured differed between organisations. Some use well-established measures such as the Warwick-Edinburgh scale,¹¹ while others use methods proposed by the Anna Freud Centre. Yet more have developed their own tools for impact measurement. Around two-thirds (65 per cent) of respondents made local health professionals aware of the benefits that their provision has for the CYP they work with.

Impact on risk and protective factors

Community organisations often take a holistic approach to the wellbeing of CYP through the spaces, services, and activities they provide, tending to look at the wider, social circumstances of their lives.¹² Interventions from formal services such as CAMHS or in-school provision may, in contrast, take a more clinical approach to deal with acute issues. One CYP mental health practitioner we spoke to said, “CAMHS, especially tier three and above, are not designed to support the social issues which may be facing a young person”.

Community organisations have a distinctive role, with their core purpose often to meet the underlying needs of their community. This includes supporting CYP and their families through circumstances which may impact negatively on their mental health and wellbeing.

Figure A in Appendix 2 (page 16) shows risk and protective factors across four domains that influence CYP mental health and wellbeing:¹³

- Individual child and young person
- Family and interpersonal relationships
- Education and work
- Community and society

Our research shows that community spaces and their associated provision help to address risk and protective factors across each of these four domains.

Table 1 (page 16) summarises the views we heard from community leaders regarding the impact on these factors by community spaces, services, and activities.

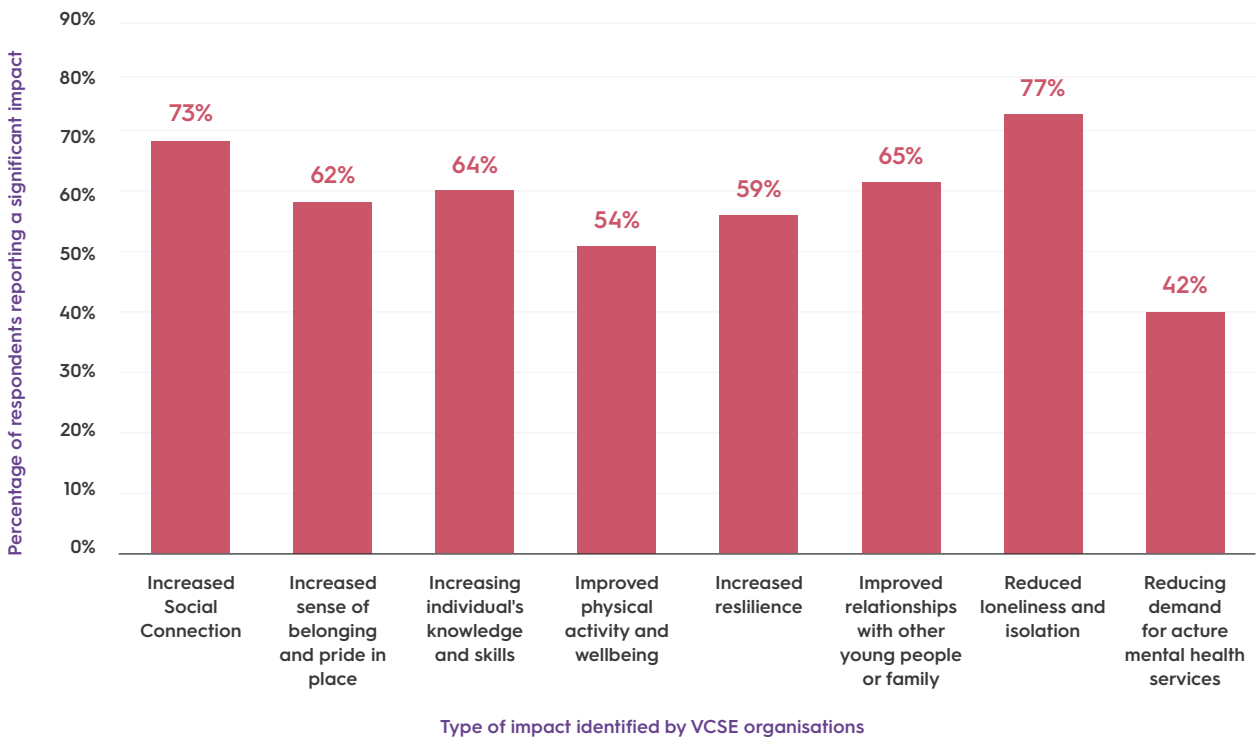
Reducing loneliness and isolation amongst CYP was the most commonly identified factor (77 per cent) on which survey respondents felt they had significant impact. Seventy-three per cent of respondents also stated that their organisation had a significant impact on increasing social connection. The survey also shows that community spaces, activities, and services have a significant impact on some of the protective factors identified above. For example, 59 per cent of respondents stated that this was the case for personal resilience.

Table 1 – Risk and protective factors addressed by community spaces

Risk Factors	Protective Factors
Low self-esteem	Social and emotional skills
Conflict within families	Personal resilience
Loneliness and isolation	Hobbies and leisure time activities
Being bullied	Extended family relationships
Not being in education, employment, or training	Engagement with learning
Experience of poverty or deprivation	Access to quality blue or green space
Family or personal financial, housing or food insecurity	Civic participation
Homelessness	Access to quality mental health support

Chart 1 summarises the perceived positive impacts on aspects of CYP mental health identified by community organisations responding to our survey.

Chart 1 – Aspects of children’s mental health and wellbeing in which community spaces, services, and activities were reported to make a significant impact



Challenges facing community organisations in providing spaces, services, and activities for CYP

The overwhelming majority (91 per cent) of community organisations surveyed said that they faced challenges and barriers to providing spaces and services for CYP. We've explored these challenges in turn.

Finances and funding

The short-term nature of funding was cited across our research as a major challenge. It hinders the ability to plan services across multiple years and on the provision of youth work and open-access activities for which there is limited dedicated funding. Also, the need to continually develop funding bids is extremely time-consuming for staff. Several organisations pointed to an additional challenge of increasing costs for the hire of community spaces where they do not own their own buildings.

We heard that stable, long-term support underpinned by sustainable funding is needed, rather than short-term interventions. This approach would build up protective factors and help young people to thrive. As one roundtable participant said: “[social and mental health issues affecting young people are] not going to be fixed by six funded sessions with specific KPIs and outcomes... Some young people require something long-term which isn't time-limited”.

Increased demand

While pressure on the capacity of organisations is caused, in part, by lack of funding, the increase in demand and complex cases was highlighted as another major challenge. Many organisations spoke of being

“inundated” by referrals from statutory services (including from schools and GPs) and being unable to cope, as well as having long-waiting lists for support themselves. One organisation has seen a 77 per cent increase in referrals to their services on the previous year.

Workforce issues – hiring, training, and retaining staff

A number of professionals we spoke with, including those working in both mainstream and specialist school provision, estimated that as many as half of young people experiencing poor mental health did not feel comfortable disclosing this within a school setting. This sentiment was echoed by young people we spoke with during the research. All said that they felt more comfortable disclosing poor mental health to friends or other trusted adults such as parents or youth workers rather than an adult within a statutory setting (such as school or healthcare workers).

We also heard that some professionals working in open access community spaces – for example youth workers – may not have sufficient training or knowledge of referral routes into the health system where they are needed. Therefore, despite community spaces often being places in which young people were happy to disclose mental health worries, when they do so, there may not be readily available pathways into further support.

With limited funding for youth work in general, community organisations were also worried about their ability to hire and retain staff. Some organisations noted that youth work as a profession did not have the recognition that it needed and that the National Youth Agency was a long way off receiving recognition by clinicians.

A lack of awareness

Our research identified an issue around lack of awareness of VCSE provision and community spaces for CYP mental health and wellbeing amongst GPs, those working in CAMHS, and in school settings. This was felt to be increasing the demand for those community organisations that are known to schools, local authorities, and health practitioners.

Conversely, a challenge was highlighted regarding a lack of knowledge by some community organisations of the referral processes into higher-level CAMHS and other statutory support and information available for CYP.

Some community organisations spoke about having good relationships with individuals within the health system and with local authorities but did not feel connected into the wider statutory mental health system. This reveals the somewhat ad hoc nature of relationships and referrals into and between statutory and VCSE provision.

Community organisations used as “waiting rooms” for CAMHS

There was a perception among community organisations and some mental health practitioners that more CYP are being referred into VCSE provision while waiting for access to higher tiers of CAMHS support.

Reasons cited included: capacity issues within the health system, increasing numbers of CYP disclosing mental health needs, a lack of awareness of the depth and breadth of support available within the VCSE sector (meaning some well-known organisations receive a high number of referrals), and higher thresholds and long waiting lists for CAMHS.

We heard from community organisations that they felt they were being treated like “waiting rooms” for higher level CAMHS support, but that they are “not triage, we are not a bandage, we are not a waiting room”.

A lack of appropriate community spaces

Almost two thirds (64 per cent) of local VCSE leaders surveyed were concerned by a lack of community spaces for CYP in which they feel a sense of ownership, relaxation and, above all, safety. Several reasons were cited for this.

The inflationary pressures of the cost of living and high energy costs are impacting on room rental prices which are becoming out of reach for some community organisations. Some local authority-owned buildings leased to communities have been sold to plug budgetary holes left by the Covid-19 pandemic. Creating a sense of ownership of space is important for young people, which is difficult in spaces used for the wider community.

Community organisations also mentioned the lack of appropriate community spaces being provided in new developments. While new developments may include playgrounds for young children, there are few developments which include space for teenagers.

Systemic barriers facing marginalised communities

Community organisations, through their provision, recognise the wider context of people’s lives. Many provide culturally specific services or spaces for individuals from particular communities or experience.¹⁴ When discussing how community spaces support mental health and wellbeing, it is important to

recognise that there is not equitable access to them. Different communities, particularly the most marginalised in our society, will have different needs and experiences.

For example, community organisations led by people from racialised communities have experienced historic underfunding. Voice4Change research has shown specific barriers facing community organisations led by people experiencing racial inequity in accessing funding, including reductions in statutory funding and struggles to win grant funding.¹⁵ Average annual income for charities led by such communities is also around half the overall average.¹⁶ Further, Voice4Change research shows that most community organisations in these communities are small or micro organisations, and include high levels of volunteerism and volunteer-led organisations.¹⁷

This historic underinvestment alongside the impacts of austerity, Covid-19, and the cost of living crisis have created capacity challenges and place a disproportionate burden on community organisations led by people from racialised communities.¹⁸

Yet the need for mental health and wellbeing support for CYP from racialised communities is huge. For example, Black and mixed-raced CYP make up 11 per cent of the population but are underrepresented in general CAMHS lists (5 per cent) and over-represented in the highest-level mental health units (36 per cent).¹⁹ They are also more likely to enter mental health services through youth justice and social services referral routes than perceived "voluntary" routes such as primary care.²⁰

Young people from marginalised communities may experience a range of challenges to accessing community spaces and support. For example:

- CYP from the LGBTQIA+ community face stigma, discrimination, and a lack of respect for their identity. Research points to the importance of actively demonstrating that a community space is inclusive for these young people.²¹
- Looked after CYP may have particular physical, emotional, and behavioural needs related to their earlier experiences before they were looked after. Conduct disorder is the most prevalent difficulty amongst looked after CYP. Aggressive and challenging behaviour associated with conduct disorder can impose a significant challenge to those caring for and supporting them.²²
- Physically disabled CYP have access needs, including transport to venues, access to buildings, and mobility around premises.
- Learning disabled CYP need staff in community spaces to be aware of their disabilities and be sensitive to them so that they feel welcomed and understood. Some of these young people can become claustrophobic or have other conditions that can limit the sorts of places they can enjoy, and appreciate areas that are spacious, with good lighting.²³

There are many deep and structural issues at work here. There is a clear need for more preventative, community-based mental health and wellbeing support which is inclusive for marginalised young people. Community organisations and those funding and supporting them need to pay careful consideration to how they can break down the barriers which stop some groups from accessing community spaces. ■

4.

Conclusion



Community spaces play a vital role in supporting the mental health and wellbeing of CYP. They can be sites of preventative activity, where CYP come to have fun, engage with their peers, learn new skills, and develop socially and emotionally. Using a range of different types of space within their neighbourhoods, community organisations across the country provide open access spaces and activities for CYP. They also provide specialist services for CYP, including the delivery of local authority contracts as well as culturally or experientially specific services for people of different communities.

Community spaces and their associated provision are impactful. In the long-term, they can help to both reduce the risk factors which influence CYP mental health and wellbeing as well as maximising the protective factors with positively contribute to it.

At their best, open-access community spaces, services, and activities look holistically at CYP and how they can be supported in the round, rather than undertaking specific short-term interventions. They produce outcomes which not only support their mental health and wellbeing but also their socialisation with other young people and trusted adults.

Community spaces are safe, neutral, and depressurised “third spaces” which allow CYP to develop and be themselves. They are staffed by qualified professionals including by trained youth workers and sometimes by volunteers and activities led by peers.

Community spaces are a vital part of the mental health and wellbeing support eco-system around CYP. But they are not simply “waiting rooms” or triage services for those with more complex mental health needs who require more formal support from services such as CAMHS. They are a space in which CYP can thrive and get the support they need to take care of their ongoing mental health and wellbeing.

In providing these spaces and services, community organisations face some pressing challenges. These challenges include a reliance on short-term and competitive grants and funding opportunities in place of long-term core funding. Workforce issues are magnified by the paucity of sustainable funding, making the hiring, retention and training of qualified staff including youth workers extremely challenging.

All of this is compounded by the referral of more and more CYP into formal mental health support. Many community spaces and their associated provision are being used as holding places for those with complex mental health and wellbeing needs. This, along with the unsustainable funding system, has meant that many community organisations have had to reduce the amount of open-access provision they can offer. Instead, they favour delivering more contracts for specialist interventions such as one-to-one counselling, talking therapies, and career advice services.

Staff in community spaces are professionals and many of them are qualified youth workers. They are often the “trusted adults” in CYP’s lives and the people to whom they may be most likely to disclose their experiences of poor mental health and wellbeing. Staff in community spaces need to have the training and capability to deal with these disclosures and the knowledge and awareness of the referral pathways into more formal services where they are needed.

This awareness, however, works two ways. The statutory sector, particularly those in school and primary care settings, must be aware of the role of community spaces and provision. This includes how they can refer CYP into these services in their local area in a timely way, so that a more preventative approach can be taken. ■

5.

Recommendations



The following policy and practice recommendations are aimed at a range of organisations and professionals across the local and national statutory and VCSE sectors. Our ten recommendations address the challenges discussed in this paper to maximise the positive impact of community spaces on CYP mental health and wellbeing.

All our recommendations require a shift in mindset towards valuing and prioritising the preventative work of community organisations and the spaces they work within. They fall under four main themes:

- 1 Resourcing community organisations
- 2 Culture change and collaboration
- 3 Workforce development
- 4 Central government policy

Resourcing community organisations

Community organisations need to be sustainable in the long term in order to conduct their preventative work supporting CYP with their mental health and wellbeing. Our research shows the importance of CYP feeling safe in, and having a sense of ownership of, dedicated community spaces.

Financial pressures on community organisations caused by the enduring impacts of austerity, Covid-19, and the current cost of living crisis are creating intense strain.

Both local authorities and the NHS have large public sector estates which include run-down and derelict spaces. There is a strong body of evidence that community ownership can create strong and successful community organisations.²⁴

Recommendation 1: Take opportunities to support community ownership of assets

ICS **Local authority**

Taking ownership of physical assets means community organisations have a long-term presence at the heart of communities. From here, they can earn their own income, generate and retain wealth for their neighbourhoods, and invest in the services they know their community needs. Local authorities (LAs) and estates teams at a system and place level within Integrated Care Systems (ICSs) should actively support Community Asset Transfer to get underused spaces into community hands. This can then help it to be put to active use in promoting CYP wellbeing.²⁵

Recommendation 2: Provide sustainable long-term funding

ICS **Local authority**

Integrated Care Boards (ICBs) and LAs should consider how they can best support community organisations and spaces to be sustainable in the long term. This requires a move away from short term, project-based funding to core, multi-annual capital and revenue funding, especially for open-access provision and for the community spaces themselves. Contracts for services between community organisations, LAs, and ICSs should be uplifted in line with inflation.

Culture change and collaboration

Community organisations are an important part of the landscape of mental health and wellbeing support for CYP. Yet the preventative work they do can be overlooked and minimised by the statutory sector. If the relationship between LAs, ICSs and the VCSE sector is not already one of equal partners, this needs to be reviewed and

changed to one of mutual respect and collaboration.

We know community organisations can have many positive impacts on CYP, from increased knowledge, skills, physical activity, wellbeing, and resilience to reduced isolation, loneliness, and demand for acute mental health services. But common impact measures across LAs, ICSs and the VCSE sector are missing. Evidencing the impact of the preventative work of community organisations and the spaces they work from is critical in making the case for early, community-based interventions and the pressure they take off statutory services.

Recommendation 3: Commission services collaboratively

ICS **Local authority**

Both ICSs and LAs should aim to commission services collaboratively with the VCSE sector. There should be shared ownership of decision-making processes to make the best use of community spaces and organisations and enable a level playing field across providers.

Recommendation 4: Ensure appropriate representation from the VCSE sector on strategic health system fora

ICS **Local authority** **PCN**

Community organisations should have a seat at the table and be included within strategic forums at neighbourhood, place, and system levels within ICSs and within the relevant partnership boards within LAs. This should enable community organisations to help shape the direction of travel locally and build parity of esteem with statutory bodies.²⁶

Recommendation 5: Agree common measures of impact across sectors

National **ICS** **Local authority**

Considerable work is needed to evidence impact in a consistent way across sectors. We need to develop a wider determinants-based theory of change model for better health and move away from output measures based on individuals to make the case for early, community-based intervention.²⁷ Community organisations and statutory providers need to work together to agree common indicators of impact and the means for collecting and reporting on impact data. There is a particular role for impact data leads within relevant central government bodies (eg, OHID, DHSC, NHS England, DCMS, DLUHC) and VCSE leaders.

Workforce development

There is currently widespread pressure on community organisations to recruit and retain staff. This is due in large part to cost of living pressures and a lack of trained and qualified youth workers. Gaps in understanding and knowledge and different working cultures between community organisations, LAs, and the health system need to be overcome. A shared understanding of the services, support, and referral routes for CYP mental health and wellbeing is needed between LAs, ICSs and the VCSE sector.

Recommendation 6: Develop a shared understanding of referral pathways between sectors

ICS **Local authority** **VCSE**

ICBs and LAs should work collaboratively with community organisations to develop and communicate referral pathways for CYP mental health and wellbeing. Training and work shadowing should

be developed for those working in community spaces of the referral pathways and options available for CYP. Sources of information about VCSE services should be created and kept up to date (eg, via local directories of services) and clear explainers for statutory referral pathways developed.

Recommendation 7: Encourage better use of the SEND local offer

Local authority

LAs should encourage better use of the "local offer" for CYP with special educational needs and disabilities (SEND) aged 0-25 which gives families information to help them find the right help and support in their area. This can ensure that those in primary care, in school settings, and in other parts of the CYP mental health and wellbeing support system are aware of local provision and community spaces in their areas.

Recommendation 8: Co-locate clinical and community services

ICS Local authority PCN VCSE

Co-location of clinical services in community settings can improve understanding and collaboration between the two around prevention support work for CYP health and wellbeing. By placing statutory health services within trusted community spaces, it also helps to increase their access by those who may be least likely to attend purely clinical settings.²⁸

Recommendation 9: Champion youth work

National ICS Local authority

The National Youth Agency (NYA) should be recognised as a key partner in the development of quality assured training for youth and community workers to support children and young people's mental health and

wellbeing. Such training should include enabling youth and community workers to effectively manage disclosures from young people who are experiencing mental ill-health. National commissioners of training, such as Health Education England and local system commissioners, such as ICSs and LAs, should consider how to enable youth and community workers in specific localities to access such quality training offers.

National policy priorities and development

There is a clear role for leadership and drive from central government to build the capacity of the VCSE sector to be able to play its full role in supporting better health and wellbeing for young people, recognising, and valuing the role of community organisations within the wider health ecosystem. In financially constrained times, this does not mean creating new, large scale spending commitments. It means making sure current policy commitments are designed to actively support community power.

Recommendation 10: Progress existing policy opportunities to support local communities

National

Government should maximise opportunities within its existing policy agenda to support local communities and develop social infrastructure. Current opportunities include: increasing the ability of community organisations to access the Shared Prosperity Fund, the Community Ownership Fund and the Levelling Up Fund, using dormant assets to establish a Community Wealth Fund,²⁹ and, putting social value at the heart of procurement reforms. ■

Appendix 1: Research methodology

This research was conducted between April 2022 and March 2023 and took a mixed-methods approach, including:

- 1.** A thematic rapid evidence review of academic and grey literature including key reports and briefing papers to inform the content of a national survey of community organisations.
- 2.** An England-wide online survey of community organisations. This received 79 responses from eight of the nine English regions and respondents from Indices of Multiple Deprivation (IMD) deciles 1-9, the majority (63 per cent) coming from organisations in IMD deciles 1-3.
- 3.** In-depth interviews with nine community leaders running provision and spaces for CYP in nine areas of England, operating in a range of geographic locations from inner city to rural areas.
- 4.** Three roundtables with VCSE and public sector partners. The purpose of these was to test the findings of the research and to better understand the support ecosystem around young people. These roundtables included partner organisations from the VCSE Health and Wellbeing Alliance with a stake in CYP mental health and wellbeing, community organisations providing spaces and services for young people, and public sector colleagues working in primary care, commissioning, mental health and wellbeing provision (including CAMHS), and in schools.
- 5.** A process of sense checking the key findings of the research by a small group of young people involved in community provision, including volunteer support for their peers.

Appendix 2:

Figure A: Influences on CYP's mental health and wellbeing

There are many factors which positively or negatively influence the mental health and wellbeing of CYP. These negative influences are "risk factors" and the things which can positively influence mental health are "protective factors."

Risk Factors				
	Child or young person	Family & personal relationships	Education & work	Community and Society
Protective Factors	<ul style="list-style-type: none"> • Mental health 'literacy' • Personal resilience • Sense of self-worth • Emotional intelligence • Nutrition and hydration • Good sleep • Physical exercise • Hobbies and leisure time (e.g. social media/screen time, arts and culture, play and creativity) • Personal aspirations and ambitions • Religion, spirituality, faith • Individual autonomy and sense of control • Sexual health and healthy sexual expression 	<ul style="list-style-type: none"> • Supportive, sensitive and responsive parenting • Parental healthy lifestyle choices • Family harmony and stability • Extended family relationships • Peer acceptance and high quality friendships 	<ul style="list-style-type: none"> • Good quality childcare • School readiness • School culture, ethos and environment • Education on mental health 'literacy' • Engagement in learning • Supportive teacher/pastoral relationships • Mental health and wellbeing support available through higher and further education, apprenticeships and workplace • Access to educational and employment opportunities • Inclusion and accessibility • Job satisfaction • Fair working conditions 	<ul style="list-style-type: none"> • Welfare system • Access to green/blue space • Safe communities • Civic participation • Opportunities for volunteering • Social participation and networks (including recreational activities) • Access to timely mental health support and social care provision • Well-planned accessible and managed built environment (e.g. walkability, access to play facilities) • Access to high-quality public services e.g. early years support, transport • Clean air

Endnotes

1. See the Government's Levelling Up the United Kingdom White Paper for more information on these funds. Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1052706/Levelling_Up_WP_HRES.pdf See also the Local Government Association for information on social value. Available at: <https://www.local.gov.uk/our-support/financial-resilience-and-economic-recovery/procurement/social-value-achieving-community>
2. The Prince's Trust, 2022, "NatWest Youth Index 2022". Available at: https://www.princes-trust.org.uk/about-the-trust/news-views/princes-trust-natwest-youth-index-2022?gclid=Cj0KCQiAz9ieBhCIARIsACB0oGLsTLgvlUxyeweiU6Q2gebWhrg_rRkE4L9mvqaDPm3sllQ708wgMwaAkFvEALw_wcB
3. NHS 75 Digital, 2022, "Mental Health of CYP in England 2022 - wave 3 follow up to the 2017 survey". Available at: <https://digital.nhs.uk/data-and-information/publications/statistical/mental-health-of-children-and-young-people-in-england/2022-follow-up-to-the-2017-survey>
4. The Princes Trust, 2022, "NatWest Youth Index 2022".
5. Wolpert et al., 2019, "Thrive Framework for system change". Available at: <http://implementingthrive.org/wp-content/uploads/2019/03/THRIVE-Framework-for-system-change-2019.pdf>
6. Public Mental Health Programme, 2021, "Conceptual Framework for Public Mental Health: online tool. NIHR School for Public Health Research". Available at: <https://www.publicmentalhealth.co.uk/>
7. What Works Centre for Wellbeing, 2018, "Places, Spaces, People and Wellbeing". Available at: <https://whatworkswellbeing.org/resources/places-spaces-people-and-wellbeing/>
8. For nearly 1 in 2 young people aged 15-16, secondary school is not an enjoyable or meaningful experience and many feel unsupported by their teachers, especially those with SEND or from backgrounds of socioeconomic disadvantage. See Young Lives, Young Futures Project, 2023, "Schools for All? Young people's experiences of alienation in the English secondary school system". Available at: <https://www.edge.co.uk/documents/349/DD0940 - Young Futures Young Lives FINAL JVbavj7.pdf>
9. UK Youth, 2022, "The Untapped potential of Youth Work" Available at: <https://www.ukyouth.org/2022/11/ground-breaking-uk-youth-report-aims-to-realise-untapped-potential-of-youth-work/#:~:text=Despite%20the%20economic%20value%20of,been%20lost%20from%20the%20sector>
10. Inclusion health is an umbrella term used to describe people who are socially excluded, who typically experience multiple overlapping risk factors for poor health, such as poverty, violence and complex trauma. See NHS England definition for further information. Available at: <https://www.england.nhs.uk/about/equality/equality-hub/national-healthcare-inequalities-improvement-programme/what-are-healthcare-inequalities-inclusion-health-groups/>
11. <https://warwick.ac.uk/fac/sci/med/research/platform/wemwbs/>
12. Locality, 2023, "Community anchors and the wider determinants of health". Available at: <https://locality.org.uk/reports/community-anchors-and-the-wider-determinants-of-health>
13. DHSC, 2023, forthcoming, "CYP's mental health - a determinants framework".
14. Locality, 2023, "Creating Health and Wealth By Stealth. Community anchor organisations, prevention services, and the wider determinants of health". Available at: <https://locality.org.uk/assets/images/LOC-CAP-Report-2023-WG05-3.pdf>
15. Voice4Change, 2015, "Funding for Black, Asian and other minority ethnic communities. Bridging the gap in funding for the BAME voluntary and community sector". Available at: <https://baringfoundation.org.uk/wp-content/uploads/2015/07/Funding-for-BAME-VCOs-Report-July-2015-V4CE-II.pdf>
16. Ibid.
17. Olulode, K., 2020, "UK BAME Charities: The Covid-19 Challenges". Available at: <https://thekolsocial.com/uk-bame-charities-the-covid-19-challenges/>
18. Locality, 2021, "No more blank pages. Understanding more about what we need to do to support local organisations working with and led by people from racialised communities". Available at: <https://locality.org.uk/reports/no-more-blank-pages>
19. NHS England, Benchmarking Report, cited in Young Minds, 2022, "Anti-Racism, Justice, Equity, Diversity and Inclusion at YoungMinds: a report on progress made and where we're heading". Available at: <https://www.youngminds.org.uk/media/st0le3pp/youngminds-ajedi-2022-report.pdf>
20. Edbrooke-Childs, J. and Patalay, P., 2019, "Ethnic Differences in Referral Routes to Youth Mental Health Services." Available at: <https://pubmed.ncbi.nlm.nih.gov/30768415/>
21. The Health Creation Alliance and NHS Property Services, 2022, "Creating spaces for community and patient wellbeing". Available at: https://www.property.nhs.uk/media/4212/thca_creating-community-spaces-for-patient-and-community-wellbeing_oct-2022.pdf
22. NICE, "Looked after CYP: statement 5". Available at: <https://www.nice.org.uk/about/nice-communities/social-care/tailored-resources/lacyp/statement-5>
23. The Health Creation Alliance and NHS Property Services, 2022, "Creating spaces for community and patient wellbeing". Available at: https://www.property.nhs.uk/media/4212/thca_creating-community-spaces-for-patient-and-community-wellbeing_oct-2022.pdf
24. For example, see (a) Power to Change, 2019, "Our Assets our Future". Available at: <https://www.powertochange.org.uk/wp-content/uploads/2019/07/Assets-Report-DIGITAL-1.pdf> (b) Mayor of London, 2021, "Good Growth by Design: Connective Social Infrastructure: How London's Social Spaces and Networks Help Us Live Well by Design". Available at: https://www.london.gov.uk/sites/default/files/connective_social_infrastructure_0_0.pdf (c) DLUHC, 2019, "By deeds and their results: How we will strengthen our communities and nation". Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/819477/MHCLG_Communities_Framework_Accessible.pdf
25. See Locality's Community Asset Transfer Guide for Community Organisations for more information. Available at: <https://locality.org.uk/assets/images/Understanding-Community-Assets-Transfer-Guide-for-Community-Organisations.pdf>
26. Locality, 2023, "Creating health by wealth and stealth. Community anchor organisations, prevention services, and the wider determinants of health." Available at: <https://locality.org.uk/assets/images/LOC-CAP-Report-2023-WG05-3.pdf>
27. See more on this proposal at <https://locality.org.uk/assets/images/LOC-CAP-Report-2023-WG05-3.pdf>
28. Ibid.
29. See the Government's Levelling Up the United Kingdom White Paper for more information on these funds. Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1052706/Levelling_Up_WP_HRES.pdf See also the Local Government Association for information on social value. Available at: <https://www.local.gov.uk/our-support/financial-resilience-and-economic-recovery/procurement/social-value-achieving-community>

Locality

Locality supports local community organisations to be strong and successful. Our national network of over 1,600 members helps hundreds of thousands of people every week. We offer specialist advice, peer learning and campaign with members for a fairer society. Together we unlock the power of community.

Power to Change

Power to Change is the independent trust that supports community businesses in England.

Community businesses are locally rooted, community-led, trade for community benefit and make life better for local people. The sector owns assets worth £870m and comprises 11,300 community businesses across England who employ more than 37,000 people. (Source: Community Business Market 2020).

From pubs to libraries; shops to bakeries; swimming pools to solar farms; community businesses are creating great products and services, providing employment and training and transforming lives. Power to Change received an original endowment from the National Lottery Community Fund in 2015 and a further £20 million grant in 2021.

VCSE Health and Wellbeing Alliance

The VCSE Health and Wellbeing Alliance (HW Alliance) is a part of the VCSE Health and Wellbeing Programme (HW Programme) which is delivered by Department of Health and Social Care and NHS England and NHS Improvement (the system partners).

The HW Alliance is a new network of 18 member organisations (and one coordinator) established to collaborate and coproduce to bring different solutions and perspectives to policy and programme issues. All HW Alliance members represent communities that we need to hear from as we develop health and social care policy and programmes.

All photography apart from case studies courtesy of © Alex Brenner



locality.org.uk

Locality | 33 Corsham Street,
London N1 6DR | 0345 458 8336

Locality is the trading name of Locality (UK) a company limited by guarantee, registered in England no. 2787912 and a registered charity no. 1036460.