

Defining research priorities for youth public mental health: reflections on a co-production approach to transdisciplinary working

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Abstract

Background

With most mental health problems established during childhood/adolescence, young people must be a key focus of public mental health (PMH) approaches. Despite the range of factors known to influence mental health, evidence for effective interventions is lacking for this age group. This study aimed to define priorities for future intervention-focussed research to support youth PMH by engaging with transdisciplinary stakeholder groups.

Methods

Our co-production approach involved priority-setting workshops with young people, researchers, practitioners and policymakers. Each workshop focussed on three thematic areas: social connections and relationships; schools and other education settings; key groups at greater risk of mental ill-health, specifically LGBTQ+ and care-experienced young people. Workshop outputs were synthesised to define research priorities.

Results

Ten priorities for youth PMH research were defined, covering the following areas: building supportive relationships; whole system approaches; social media; support at times of transition; improving links between different services; development and training for those who support young people; staff mental health; engaging with families; awareness of and access to services; out of school and community settings.

Conclusions

These research priorities can inform future intervention-development to support youth PMH. Our transdisciplinary approach means the identified research priorities are more likely to be relevant to young people's experiences and needs, and to fit with the needs of those working in practice and policy to support young people.

Background

The mental health of young people (defined as those aged 10–24 years [1]) is a major global public health challenge [2] and a national priority in the UK [3], with 75% of mental health problems established by age 24 [4]. With greater understanding of the risk and protective factors for mental health that span individual, community, organisational and societal levels, mental health is increasingly being recognised as a public health issue [5]. Public mental health strategies focus on the promotion of good mental health and prevention of mental ill-health at the population level, and also targeting those who are at greatest risk and may not benefit from universal approaches, as well as incorporating individual treatment of those with mental ill-health [6, 7]. Public mental health strategies also highlight a life course approach. However, evidence for effective interventions to promote good mental health and prevent mental ill-health among young people remains limited. Young people's lives are complex and diverse and their mental health may be impacted by a range of different factors, including the added impact of recent disruption to their lives caused by the COVID-19 pandemic. Evidence is needed to support interventions aiming to improve young people's mental health, but with a wide range of different domains that could be targeted through public health approaches, it is important to prioritise those areas that are most relevant to young people and where intervention would be most welcome and feasible.

A transdisciplinary approach to identifying priority areas for research

In order to ensure that interventions to support youth public mental health are relevant to young people, and to those who support young people, it is important that their voices are included when making decisions on the areas to prioritise within research. Therefore, rather than focussing on this topic solely from an academic perspective, a transdisciplinary approach was adopted. Transdisciplinary approaches to research involve collaboration between representatives of different disciplines across academic, public, private and voluntary sectors as well as public involvement to share knowledge on an issue and work together to develop new research and identify solutions [8]. However, bringing together different groups of stakeholders to achieve a common aim is not without challenges, and requires a collaborative approach to facilitate the sharing of knowledge and experiences and support different groups to work together effectively [8]. Co-production and design-led approaches have been highlighted as effective methods to facilitate transdisciplinary working [9].

Co-production was originally developed as an approach to service development where adult service users were recognised as active participants in shaping and delivering services rather than as passive recipients of services [10]. In recent years, co-production has become a popular approach in development work with young people and, most recently, in academic research. Within mental health research specifically, co-

production is a relatively new and innovative approach, with evidence of positive outcomes including improved mental wellbeing for people involved in the process [10]. The New Economics Foundation has developed six principles of co-production that are widely used as a framework to understand co-production [10]:

(1) Taking an assets-based approach: transforming the perception of people, so that they are seen not as passive recipients of services and burdens on the system, but as equal partners in designing and delivering services.

1. Building on people's existing capabilities: altering the delivery model of public services from a deficit approach to one that provides opportunities to recognise and grow people's capabilities and actively support them to put these to use at an individual and community level.
2. Reciprocity and mutuality: offering people a range of incentives to work in reciprocal relationships with professionals and with each other, where there are mutual responsibilities and expectations.
3. Peer support networks: engaging peer and personal networks alongside professionals as the best way of transferring knowledge.
4. Blurring distinctions: removing the distinction between professionals and recipients, and between producers and consumers of services, by reconfiguring the way services are developed and delivered.
5. Facilitating rather than delivering: enabling public service agencies to become catalysts and facilitators rather than being the main providers themselves.

Defining research priorities for youth public mental health

While previous priority setting work for mental health research exists (e.g. 11, 12), only a few studies have engaged with stakeholders, including young people, to wholly focus on defining research priorities for young people's mental health. These include a UK-based study by The McPin Foundation taken forward by the National Institute for Health (NIHR), and a more global study by the Cochrane Common Mental Disorders–Children and Young People Satellite, hereafter referred to as the Satellite. The McPin study [13] used an established method that brings patients, carers and healthcare professionals together in priority-setting partnerships to set the top 10 priority areas for research in particular areas of health and care [14]. Results highlighted a range of topics around interventions and services for young people's mental health such as early screening of mental health problems and waiting times for services. Subsequently, the NIHR identified and prioritised research questions within the priority areas identified by the McPin study, using a health research prioritisation method pioneered by the Child Health and Nutrition Research Initiative (CHNRI) [15]. The results are currently confidential and being written up for publication. As part of a large programme of work to establish and prioritise research questions for child and youth mental health, the Satellite conducted a cross-sectional online survey on the mental health disorders that should be of highest priority and potential ways to address them [16]. Results showed respondents believe anxiety, depression and suicide are the most important issues to be addressed, and highlighted the need for service reforms, and strengthening parenting and educational responses as important ways to address mental disorders. However, the focus of the McPin, NIHR and Satellite studies tend towards treatment and support for those with diagnosed mental health problems, rather than public mental health approaches and related interventions that focus on promotion and prevention at a population level.

This paper describes the co-production approach undertaken by the Transdisciplinary Research for the Improvement of Youth Mental Public Health (TRIUMPH) Network [17] to define research priorities for youth public mental health, with a focus on intervention development. Central to the TRIUMPH Network's priority setting process was the active involvement of a range of stakeholders including young people, academics, practitioners, and policymakers from across different public and mental health related disciplines.

From a public mental health perspective, whilst recognising the broad range of influences on young people's mental health, the TRIUMPH Network identified three broad thematic areas as a focus for further research based on existing evidence in this field and the expert knowledge of members of the study team: Key Groups of young people at greater risk of mental ill health—initially focussing on care-experienced and LGBTQ+ young people [18, 19]; Social Connections and Relationships [20–25]; and Schools and Other Education Settings [26]. These thematic areas reflect key social and contextual factors that affect young people's mental health, rather than individual-psychological factors that are more common in traditional mental health research.

This paper presents: the priorities and specific questions for research on young people's mental health that were defined through the priority setting process within each of the three thematic areas; and using the New Economics Foundation principles, reflects on the co-production approach that was taken to facilitate transdisciplinary working and ensure a wide range of stakeholders, including young people, were actively involved in the priority-setting process.

Methods

While co-production provided the overarching approach for involving stakeholders, design methods, supportive of the key principles of co-production and building on the disciplinary expertise of the TRIUMPH Network team, were used to structure the engagements with stakeholders

and facilitate conversations. The approach for identifying research priorities for youth public mental health had three main stages: 1) a priority setting workshop with young people from the TRIUMPH Network Youth Advisory Group (YAG; described below); 2) priority setting workshops and online consultation with TRIUMPH Network stakeholders from across the UK; 3) collation of workshop/consultation outputs and identification of final research priorities. All TRIUMPH Network activities have been approved by the University of Glasgow College of Social Sciences Research Ethics Committee (reference: 400180214). Participants were told that the information gathered from the workshops would be used to identify research priorities for the TRIUMPH Network. By attending the workshops, participants consented to their data to be used for this purpose.

Stage 1: Priority setting with the TRIUMPH Network Youth Advisory Group

Within the TRIUMPH Network, a key mechanism for involving young people as research partners is via a Youth Advisory Group (YAG). The YAG's role is to support the development of the Network, including being involved in strategic decision-making. The YAG is made up of 16 young people aged 16–24 years, recruited through partner youth organisations, one in each of the four UK nations that were chosen to reflect the whole population remit of the Network and also the two identified key groups of young people (those with care-experience and LGBTQ+) [27]. YAG members are reimbursed for their time and contribution to the Network in line with NIHR guidelines.

Workshop

The priority setting process began in June 2019 with a workshop involving all 16 members of the YAG. Three workshop tables were set up, one per thematic area, with a large table-top conversation template and post-it notes that was designed to structure and capture discussion, and guide facilitators to engage the YAG in sharing their insights (see Figure 1 left). Working in three groups, each group spent 30 minutes discussing each thematic area. The discussions were facilitated by academic researchers from the TRIUMPH Network with expert knowledge of each thematic area (hereafter called 'Theme Leads'). After the final rotation, the YAG members were given three stickers to identify their key priorities for each theme.

Following the workshop, the young people's discussions were analysed through emergent clustering and synthesis of the post-it note contributions. For each thematic area, two researchers clustered the post-it notes individually and reviewed the resulting topics together. The synthesised topics were then reviewed by the Theme Leads who provided contextualised detail on discussions they had facilitated, and members of the YAG subsequently agreed the final list of priorities from the workshop. The priorities identified by the YAG were carried forward into Stage 2 of the priority setting process.

Stage 2: UK-wide stakeholder priority setting

Workshops

Four priority setting workshops were conducted across the UK—in Belfast, Cardiff, Glasgow and London—between November 2019 and January 2020. Academics, practitioners and policymakers from different sectors including health and social care, education and third sector organisations with relevant expertise in young people's mental health were identified and invited to attend. Local youth organisations and schools were also contacted to invite/support young people to attend the workshops. A total of 188 people participated in the workshops (Belfast=41; Cardiff=55; Glasgow=44; London=28). Of these, 20.2% (n=38) were young people aged 13–24 years, 35.6% (n=67) were academics, 29.3% (n=55) were practitioners, and 14.9% (n=28) were policymakers. Disciplines included those with expertise in public health, psychiatry, psychology, neuroscience, education, health care, social work, youth work and art and design. Prior to the workshops, participants were sent a brief about each theme, which included a theme summary, key insights from the YAG priority setting workshop and questions for exploration in the workshops.

The main workshop session followed a similar format to the YAG workshop. Tables were organised by thematic area and each participant was involved in discussions for two thematic areas (of their choice and relevant to their experience), which lasted approximately one hour each. Each table discussion was led by a facilitator (typically a Theme Lead) and supported by a dedicated post-it note-taker, and an updated version of the YAG workshop template was used to guide the discussion (see Figure 1 right and Figure 2). Importantly, the template included the priorities identified at the YAG workshop for that thematic area.

Online consultation

In parallel with the workshops, a short online survey was conducted. The survey included questions on views on the key factors influencing young people's mental health and what needs to change to improve young people's mental health. Respondents were asked to identify key research questions or topics they think need to be addressed within each of the TRIUMPH Network thematic areas in order to make these

changes. The survey was publicly accessible and was advertised through the TRIUMPH Network mailing list and Twitter. Of the 46 people who completed the survey, three were young people, 17 were academics, 23 were practitioners, and three were policymakers, although respondents were able to select more than one of these categories in their response and some did not complete this section of the survey.

Stage 3: Analysis of workshop/consultation outputs and identification of research priorities

The post-it note contributions from each of the Stage 2 workshops were transcribed and organised based on thematic area and UK nation, and the contributions from the online consultation were incorporated. The collective data were then analysed by four researchers from the TRIUMPH Network team. Each researcher was assigned a thematic area (Key Groups was separated into two: care-experienced and LGBTQ+ young people). Within each thematic area, the researchers clustered the data collected from the Priorities area of the conversation template (including the YAG priorities), along with the data from the online consultation, into draft topics (research priorities). The researchers then came together to review across all thematic areas to identify recurring and discrete priorities i.e. priorities that were identified across all thematic areas or specific to just one or two areas. Then, a subset of the post-it note contributions from each of the other three discussion areas of the conversation template (Knowledge, Actions and Who) were cross-checked against the identified priorities to ensure there were no additional topics that had not already emerged and to validate the identified priorities.

The results of the clustering analysis were reviewed by the YAG who agreed with the content but suggested alternative wording of some priorities. The draft priorities, together with the full results of the thematic clustering, were then reviewed by the Theme Leads. The Theme Leads ensured the priorities were within the scope of public mental health research; distilled and formed the broad list of priorities into a reduced set; and developed research questions for each priority that collectively allowed scope for the full/original list of priorities to be addressed. The wording and structure of the research priorities and questions were then revised for consistency across the three thematic areas. A final review took place between the researchers involved in the original clustering analysis to ensure nothing had been lost without good reason.

Results

Youth Advisory Group priorities for mental health

Within each of the TRIUMPH Network thematic areas, young people identified priorities where they felt improvements should be made to support their mental health (Table 1).

Final research priorities for youth public mental health

A final set of 10 priorities for research into youth mental public health were defined through the analysis of the UK-wide stakeholder priority setting workshops (incorporating the priorities from the YAG priority setting workshop) and responses to the online consultation. The priorities are as follows:

- Building relationships that support good mental health and wellbeing;
- Whole system approaches to support young people's mental health;
- Social media and mental health;
- Supporting young people at times of transition;
- Improving links between different services and settings;
- Development and training for those who support young people's mental health;
- Staff mental health and wellbeing;
- Engaging with families;
- Young people's awareness, access and experience of services;
- Out of school and community settings that support mental health and wellbeing.

Each of these priorities were discussed across all of the TRIUMPH Network thematic areas to some extent, however, within each thematic area different evidence gaps and research questions were identified with some priorities more prominent in some thematic areas than others. The specific research questions highlighted within each thematic area are presented in Tables 2–4.

Discussion

Research priorities for youth public mental health

This paper contributes a detailed set of priority areas and questions for future research in youth public mental health, defined through a priority setting process involving young people, academics, practitioners, and policymakers from across different public and mental health related disciplines. Our study broadly supports several of the research priority areas identified by the McPin study [13]. For example, improving working relationships/links between organisations that support young people's mental health, and training for school/college staff to better support young people's mental health. As noted, the McPin study was limited to priority areas and did not develop research questions. A separate stakeholder engagement exercise by NIHR aligned the McPin priorities with specific research questions, however the results have not yet been published. Similarly, several of the research themes identified by the Satellite study [16] are broadly consistent with priorities identified by the TRIUMPH Network. For example, the themes 'lack of mental health literacy' and 'enhance role of education system'. The key contribution of our study to the existing literature on research priorities in youth mental health is: a focus on public mental health; more granular research questions on the thematic areas of Key Groups, Social Connections and Relationships, and Schools and Other Education Settings with clear direction for where future research, intervention development and evaluation could be beneficial; and our approach to priority setting.

Reflections on the priority setting approach

This paper describes the co-production approach and design engagement that the TRIUMPH Network used to define research priorities for youth public mental health. Here, we return to the New Economics Foundations co-production principles to reflect upon our process and our learning.

Taking an assets-based approach: Through co-producing the TRIUMPH Network's research priorities, we ensured that young people, practitioners and policymakers were involved as partners in developing our research agenda from the start, which will be used to define the direction of future Network activities. This is important because young people and other stakeholders are often brought into the research process after the research topic and questions have been defined by academics. Through involving stakeholders from the beginning of the process we value and validate the knowledge, skills and experience that they bring to the work.

Building on people's existing capabilities: Although all of the stakeholder groups are viewed as equal partners, the TRIUMPH Network has a clear process for building young people's capacity to participate in research processes, in the form of the YAG, whereas processes to involve practitioners and policymakers are less structured. This is reflected in the involvement of different stakeholder groups in the priority setting process where YAG members had multiple points where they could influence the priorities, whereas practitioner and policymaker involvement was largely limited to the priority setting workshops and online consultation. The co-production approach and stakeholders' views clearly influenced the final research priorities. For example, at the first workshop the YAG members provided feedback on the language used to discuss the different aspects of their lives and suggested changes in the names of the thematic areas, which were subsequently updated as suggested, and many of the final research priorities reflect the practice-based focus of the priority setting workshop discussions among practitioners and policymakers.

Reciprocity and mutuality: This principle speaks to the transdisciplinary nature of the TRIUMPH Network, where research collaboratives are built not only across academic disciplines but also across different stakeholder groups. YAG members provided positive feedback on their experiences of the priority setting workshop. In particular, they valued the opportunity to express and share their views and potentially improve experiences for other young people. For example, one young person commented "[It] was an amazing opportunity to meet young people like myself and hear what they had to say while getting my own opinion voiced" and "It was a great experience and really fun to get together and talk about our experiences and how we could improve them for other young people". Other stakeholders who attended the subsequent priority setting workshops similarly provided positive feedback. In particular, stakeholders commented on the value of the opportunity to discuss youth public mental health with people from different backgrounds, job roles and sectors, and having young people involved as active participants alongside adults and hearing their views and experiences.

Peer support networks: Defining research priorities was the TRIUMPH Network's first major task and building relationships within the Network team, across sectors and disciplines, and between professionals and young people was an ongoing aspect of the priority setting process. Building trusting relationships both between Network staff and YAG members, and between YAG members themselves, has been a priority and significant staff time has been invested in these relationships. Discussing research priorities with YAG members has both benefited from these relationships and, in turn, strengthened the relationships as we learn more about each other and discover shared and differing experiences and views. While the Network had existing relationships with some stakeholders, the priority setting process provided an opportunity to strengthen these relationships, as well as developing new relationships with other individuals and organisations.

Blurring distinctions: A key strength is that the TRIUMPH Network prioritises including views, ideas and experiences across stakeholder groups in all of our work. At the priority setting workshops we repeatedly heard that people have multiple intersecting professional and personal identities (for example, LGBTQ+ young people are also interested in other topics; some professionals are also under 24; some policy makers also have lived experience of mental health issues). While these multiple identities were respected and explored in the TRIUMPH Network workshop discussions, as a Network, and in research more widely, these groups of stakeholders are often identified as being distinct. In future, it is likely to

be beneficial to approach transdisciplinary research that encompasses the intersectionality of people's professional and personal identities, rather than requiring people to fit into specific stakeholder groups with certain expectations around their needs and experiences.

Facilitating rather than delivering: Romney [28] describes dialogue as “focused conversation, engaged in intentionally with the goal of increasing understanding”. In the process outlined in this paper, the conversation templates were designed to facilitate dialogue between the different stakeholders in order to hear each other's thoughts, explore similarities/differences and arrive at a set of priorities that reflect the full range of experiences and viewpoints. However, despite its transdisciplinary nature, the TRIUMPH Network is located primarily within academia and its focus is upon research as a means to improving youth mental health, whereas priorities for non-academic stakeholders were often related to development of practice. For example, where academics might want to ask questions about evidence, practitioners often wanted to ask questions about how a service should be provided and the funding available for it. Where this was the case, academic members of the team needed to make judgements about whether these practice-based priorities could be adapted to focus upon research. Therefore, while all stakeholders had the opportunity to engage in the focused conversation, they did not have the power to fundamentally change or meaningfully challenge the primary focus on research. While this dialogue shaped the final research priorities, the power to make final decisions about the priorities lay with the TRIUMPH Network Theme Leads (all academics) and the wider TRIUMPH Network team (mostly academics).

Limitations

A limitation with our study is that the three broad thematic areas, upon which the priority setting process was based, were identified by the TRIUMPH Network team and not co-produced with stakeholders, including young people. Further, that other influences on young people's mental health not covered within the three thematic areas did not form an intentional part of the workshop discussions. However, given the broad range of influences on young people's mental health, these thematic areas, identified from the literature and the Theme Leads' ongoing research, provided a productive frame for stakeholder discussion. An additional limitation is that, while the UK-wide priority setting workshops were open to all young people, those aged 10–12 years were not represented. In addition, workshop attendance was by invitation only to ensure a broad spread across disciplines, therefore some relevant individuals or organisations may have been overlooked.

Conclusion

This paper describes a priority setting process undertaken by the TRIUMPH Network to define research priorities for youth public mental health, and reflects on the co-production approach taken to ensure the voices of multiple stakeholders, and importantly young people, were heard. The resultant set of research priorities and questions provides a focus for future research within youth public mental health and intervention development, and provides greater granularity than prior work on the thematic areas of Key Groups, Social Connections and Relationships, and Schools and Other Education Settings. Our transdisciplinary approach means that interventions targeting these priorities are more likely to be relevant to young people's experiences and needs, and to fit with the needs of those working in practice and policy to support young people.

Abbreviations

NIHR – National Institute for Health

TRIUMPH – Transdisciplinary Research for the Improvement of Youth Mental Public Health

YAG – Youth Advisory Group

Declarations

Ethics approval and consent to participate

Ethics approval was granted by the University of Glasgow College of Social Sciences Research Ethics Committee (reference: 400180214), and consent was obtained from participants.

Consent for publication

Not applicable.

Availability of data and materials

The datasets are available from the corresponding author on reasonable request.

Competing interests

The authors declare that they have no competing interests.

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Authors' contributions

All authors contributed to the design and implementation of the research, to data collection, to the analysis of the results, and to the drafting the manuscript. All authors read and approved the final manuscript.

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Tables

Due to technical limitations, Tables 1, 2, 3 and 4 are only available as a download in the Supplemental Files section.

Figures



Figure 2

Example of workshop attendees capturing discussions using the conversation template.

Supplementary Files

This is a list of supplementary files associated with this preprint. Click to download.

- [Tables.docx](#)