ISRCTN25173204 https://doi.org/10.1186/ISRCTN25173204

Cash for families

Submission date	Recruitment status	[ ] Prospectively registered
06/11/2025	Recruiting	[ ] Protocol
Registration date	**Overall study status**	[ ] Statistical analysis plan
08/12/2025	Ongoing	[ ] Results
Last Edited	**Condition category**	[ ] Individual participant data
26/05/2026	Mental and Behavioural Disorders	[X] Record updated in last year

Plain English summary of protocol

Background and study aims
Research suggests that 'cash transfer' programmes – programmes in which families receive cash payments - have been found to improve social, mental and physical health outcomes for children, parents/carers and families. However, little is known about the impact of this type of support in England. This study aims to help understand this better and to find out whether giving families money to use however they want can improve young people's wellbeing and mental health. This study focuses on families who receive support from social care services.

To provide strong evidence on the impact of these unconditional cash transfers, which is needed to justify this high-cost intervention, the research team is conducting a trial where families are allocated to one of two groups at random: one group of families receives both a new form of financial support (unconditional cash transfers) and their usual social care services, while a second group of families continues to receive only their usual social care services.

The research team also explores how the new form of financial support intervention improves children's wellbeing, for example, whether the cash transfers reduce financial or family stress and improve families' home life. Additionally, the team looks at how the intervention is carried out and if the intervention is done in the correct way. This includes checking whether the financial support is delivered as planned.

Who can participate?
Families who live in a participating local authority and have at least one child receiving social care support can take part in the study. This includes families with a Child in Need or a Child Protection Plan status who are eligible to receive financial support under Section 17 of the Children Act 1989.

What does the study involve?
Participating families are put into one of two groups at random: one group receives additional financial support while the other group, known as the control group, are offered no extra financial support. The families receiving the additional financial support receive weekly payments over 45 weeks. The control group receives their usual social services support and any pre-existing financial aid, such as Universal Credit, but no extra money.

The study is introduced to the families by local authority practitioners, such as their social worker. The participating parent-carer and their child are asked to complete up to three online surveys about their wellbeing, mental health, family functioning, financial circumstances, and home life — at the start of the study, and again at 4, 8, and 18 months after the family has been randomly allocated to a group. Both the parent-carer and the child receive a gift voucher for each survey they complete.

Some participating parents and carers are asked to take part in interviews to discuss their family experiences during the study. They are given a gift voucher as a thank-you for taking part. A group of local authority practitioners and staff involved in processing the payments is also invited to a focus group to discuss their experiences of the study.

What are the possible benefits and risks of participating?
Families taking part help the research team to understand the impact of unconditional cash transfers on families and ensure that everyone's views are considered and different viewpoints heard. It's unlikely that there are any risks to the family by taking part.

Where is the study run from?
The study is coordinated by The Anna Freud Centre in collaboration with King's College London, University of Exeter and University of Plymouth, and supported by participating local authorities to identify eligible families.

When is the study starting and how long is it expected to run for?
The study started in April 2025 and will end in September 2028, when the study team expects to report the results.

Who is funding the study?
The Youth Endowment Fund

Who is the main contact?
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Study information

Scientific Title
A randomised controlled trial of a social care intervention

Study objectives
Primary research question:
1. Is providing families with a child aged 10-16 under CiN/CPP with Unconditional Cash Transfers (UCTs), plus Business-as-Usual (BAU) services, more effective than BAU-only in reducing child-reported externalising behavioural difficulties (primary outcome)?

Secondary research questions:
Is providing families with a child under CiN/CPP with UCTs, plus BAU, more effective than BAU-only in improving:
1. Child-reported internalising difficulties?
2. Child-reported prosocial behaviour?
3. Child-reported impact of difficulties?
4. Child-reported family functioning?
5. Child engagement in education?
6. Child-reported substance use?
7. Child-reported time spent with caregivers?
8. Welfare concerns for the child?
9. Parent/carer-reported financial stress?
10. Parent/carer mental health and wellbeing?
11. Parent/carer-reported family functioning?

Is the impact of UCTs on the primary outcome explained (mediated) by changes in financial circumstances and one or more of the theorised pathways:
1. The Family Stress Model (e.g., parent-reported financial stress, parenting stress)?
2. The Resource Investment Model (e.g., housing quality, educational resources and opportunities, parent-child time spent together)?
3. Change in wider living environment (i.e., area-level deprivation)?

Is the impact of UCTs on primary and secondary outcomes, and mediators, different for families (moderated) according to:
1. Baseline level of income?
2. Level of state involvement?
3. Amount of cash received?
4. Number of children in the family?
5. Child gender and ethnicity?

Ethics approval required
Ethics approval required

Ethics approval(s)
Approved 01/08/2025, University College London Life and Medical Sciences Research Ethics Committee (University College London, Gower Street, London, WC1E 6BT, United Kingdom; +44 (0) 20 7679 2000; ethics@ucl.ac.uk), ref: 1553

Primary study design
Interventional

Study design
Multicentre interventional randomized controlled trial

Study type(s)
Efficacy

Health condition(s) or problem(s) studied
Mental health and wellbeing of children with social care input (i.e. Child in Need (CiN) or Child Protection Plan (CPP) status)

Interventions
The intervention group receives unconditional financial assistance in the form of cash. Each family receives payments for over 45 weeks. There are fixed dates for starting the intervention and receiving cash, and there is tapering near the end.

The control group (Business-As-Usual; BAU) receives all forms of service as they would were they not part of the trial. This includes financial or material support provided by local authorities via social workers' provision through s.17 of the Children Act 1989. It also includes existing community resources and financial capability support (e.g., accessing benefits, money management) provided by a range of statutory and third sector organisations. This is likely to be heterogeneous across participating areas.

All families in the trial can access existing financial/material support and financial capability support in line with the respective services’ eligibility criteria.

This study is a two-arm efficacy RCT: UCT + BAU vs. BAU only. Randomisation occurs at the individual child level, meaning that if a family has multiple children who meet the inclusion /exclusion criteria, one is selected (the youngest). A 1:3 allocation ratio (UCT + BAU: BAU only) is used to maximise power whilst keeping the intervention costs as low as possible, to enable the trial to be feasible.

Intervention Type

Other

Primary outcome(s)
Child-reported externalising difficulties measured using the conduct + inattention difficulties subscales of the Strengths and Difficulties Questionnaire (SDQ), measured at baseline and 35 weeks post-randomisation

Key secondary outcome(s)
Child-reported outcomes measured at baseline and 35 weeks post-randomisation:
1. Internalising difficulties measured using the emotional + peer difficulties subscales of the SDQ
2. Total difficulties measured using the total score of the SDQ
3. Prosocial behaviour measured using the prosocial behaviour subscale of the SDQ
4. Impact of difficulties measured using the impact supplement of the SDQ
5. Family functioning measured using the total score of the Systemic Clinical and Routine Outcome Evaluation (SCORE-15)
6. Substance misuse
7. Time spent engaging in activities with parent/carer using a subscale of the Global Appraisal of Individual Needs - Monitoring 90 Days (GAIN-M90)

Parent/carer-reported outcomes measured at baseline and 35 weeks post-randomisation:
1. Parent/carer anxiety measured using the total score of the Generalised Anxiety Disorder (GAD-7)
2. Parent/carer depression measured by the total score of the Patient Health Questionnaire (PHQ-9)
3. Parent/carer wellbeing measured by the Short Warwick-Edinburgh Mental Wellbeing Scale
4. Family functioning measured by the total score of the SCORE-15

Parent/carer-reported outcomes measured at 18 weeks post-randomisation:
1. Financial circumstances: number of jobs, hours worked per week, type of employment, highest level of education, benefits received, household income, and postcode to identify the index of multiple deprivation.
2. Parent/carer wellbeing measured by the Short Warwick-Edinburgh Mental Wellbeing Scale
3. Time spent engaging in activities with parent/carer using a subscale of the Global Appraisal of Individual Needs - Monitoring 90 Days (GAIN-M90)
4. Financial stress will be measured using an adapted version of the Financial Stress Questionnaire
5. Worries and conflicts about money will be measured through two bespoke closed questions with Likert-style response items: “We worry a lot about money in the house” and “There are often arguments in the house about money”.
6. Housing quality will be measured using a bespoke set of 6 closed questions about aspects of the family’s physical home environment, specifically (i) the adequacy of heating, plumbing and electricity, (ii) internal structural damage and (iii) the presence of damp or mould.
7. Educational resources and opportunities will be measured using a bespoke measure that captures children’s access to relevant resources and opportunities. It will be informed in part by items in the HOME-21 that are suitable for young people aged 10-16 years.
8. Parenting stress will be measured using the 18-item Parenting Stress Scale (PSS; Berry et al., 1995).
9. Household space and living arrangements will be measured using bespoke questions
10. Primary caregivers’ perceptions of their home and neighbourhood will be measured using bespoke questions.

Local Authority reported outcomes measured at baseline and 35 weeks post-randomisation:
1. Welfare concerns about the child measured by the number of strategy discussions and contacts/referrals to the Multi-Agency Safeguarding Hub.
2. Child's school attendance and fixed-term and permanent exclusions.
3. Changes to social care status (i.e., child entering care and duration)

Completion date
18/09/2028

Eligibility

Key inclusion criteria
1. Child aged 10-16 years
2. Child under Child in Need or Child Protection Plan
3. Family eligible for financial support under S17 at a minimum for three weeks from the time of identification, by which time the intervention would have begun for those assigned to this condition

Participant type(s)
Service user, Other

Healthy volunteers allowed
No

Age group
Child

Lower age limit
10 Years

Upper age limit
16 Years

Sex
All

Total final enrolment
0

Key exclusion criteria
1. The sole reason for the CiN status is the child having a disability
2. The practitioner identifying the family knows of a risk of financial exploitation for the family or members thereof
3. The practitioner identifying the family knows of a risk of harm that could arise from taking part in the study (i.e., serious, harmful, and persistent parent/child substance use that would be escalated through increased financial resources; a family member is subject to Prevent input; a family member is at imminent risk of serious physical harm requiring sustained hospitalisation from another family member) – this would be agreed on a case-by-case basis by the SPOC/ practitioner with the payment agent
4. There is an imminent escalation of social care/ state input, meaning that the child is likely to

be taken into care (e.g., the family is subject to Public Law Outline proceedings) or into the children and young people's secure estate
5. The family or members thereof are under criminal investigation for fraud or financial offences

Date of first enrolment
30/10/2025

Date of final enrolment
06/12/2026

Locations

Countries of recruitment
United Kingdom

England

Study participating centre
Ten to fifteen local authorities in England
-
-
England
-

Sponsor information

Organisation
University College London

ROR
https://ror.org/02jx3x895

Funder(s)

Funder type
Not defined

Funder Name
Youth Endowment Fund

Alternative Name(s)
YouthEndowFund, YEF

Funding Body Type
Private sector organisation

Funding Body Subtype
Trusts, charities, foundations (both public and private)

Location
United Kingdom

Results and Publications

Individual participant data (IPD) sharing plan
The datasets generated during the current study will be stored in a non-publicly available repository (The Youth Endowment Fund Evaluation Data Archive - https://youthendowmentfund.org.uk/evaluation-data-archive/)

At the end of the study (winter 2028), the research team will share the information gathered about all of the children who have taken part with the Department for Education (DfE). The DfE will replace all identifying information about the children who have taken part in the study (their name and date of birth) with the child's unique Pupil Matching Reference number in the DfE's National Pupil Database. The DfE will transfer this data to the Youth Endowment Fund (YEF) archive, which is stored in the Office for National Statistics' Secure Research Service. The data in the archive is completely separate to any information that could identify participants, meaning the data is pseudonymised. The YEF is the 'controller' of the information in the YEF archive. By maintaining the archive and allowing approved researchers to access the information in the archive, the YEF is performing a task in the public interest and this gives the YEF a lawful basis to use personal information.

The YEF will keep information in the YEF archive for as long as it is needed for research purposes. Data protection laws permit personal information to be kept for longer periods of time where it is necessary for research and archiving in the public interest and for statistical purposes. The YEF will carry out a review every 5 years to assess whether there is a continued benefit to storing the information in the archive, based on its potential use in future research. Once information goes into the YEF archive it can no longer be deleted as that would affect the quality of the archived data for use in future research.

IPD sharing plan summary
Stored in non-publicly available repository