RESEARCH ROUNDUP

Social Prescribing







Introduction

At APPTA, we strive to find relevant and timely research that has the potential to influence policy decision making for the aging population. One way of doing this is through our Research Roundup series. Our team devotes time to reading and prioritizing academic papers and grey literature, and investigates programming that fosters innovation related to how we care for older adults. We then summarize that information for a quick and consumable product. These periodical documents will summarize evidence based on relevant policy topics that are discussed through our ongoing stakeholder engagement.

If there are particular topics of interest you would like us to investigate, please let us know by emailing Daniel Smiley, Research & Logistics Specialist, at daniel.smiley@dal.ca.

For this first roundup, we are looking at *social prescribing*.

^{1.} doi.org/10.1136/bmj.l1285



What is social prescribing?

Non-medical interventions are increasingly being proposed to address wider determinants of health, with the aim that patients will improve their health behaviours and better manage their conditions. This is known as social prescribing. The underlying hypothesis is that addressing health concerns by offering a range of social activities and interventions can be as beneficial as addressing biomedical issues. Social prescribing does this by linking traditional clinical practice with activities and support services within the community. A "social prescription" is a referral to these activities, which are typically provided by local voluntary and community sectors.¹



A person
experiences
social barriers and
challenges that
contribute to poor
health



A prescriber (ex. GP) recognizes the impact of social determinants on their client's health



A community navigator receives a referral and works collaboratively with the client to connect them to communitybased supports



The client is given a social prescription: a non-medical co-created support in the community

Definitions

For the sake of clarity, we have defined some terms that might be unfamiliar, which you will come across in the summaries below.

Link worker. A link worker is a community navigator that serves as a liason for patients seeking a social prescription. They direct the patient to appropriate organizations or activities within the community.

Signposting. Signposting is the act of directing a patient to a particular social prescription activity or service.

Surgeries. Surgeries are GP offices in the UK.



Literature Review

Social prescribing for migrants in the United Kingdom: A systematic review and call for evidence

Zhang, C. X., Wurie, F., Browne, A., Haworth, S., Burns, R., Aldridge, R., Zenner, D., Tran, A., & Campos-Matos, I

2021, UK

Link to article

Despite the positive benefits of social prescribing, this article argues that services should be tailored as much as possible to migrants' preferences for language, culture, gender and service delivery format. Robust evaluation should be embedded into the planning and commissioning of social prescribing programs in future. Better recording of sociodemographic characteristics (e.g. indicators of migration like country of birth and migrant typology) will enable a richer understanding of how social prescribing works and for whom. Link workers also require appropriate training on how to support migrants to address the wider determinants of health.

Impact of social prescribing to address loneliness: A mixed methods evaluation of a national social prescribing programme

Foster, A., Thompson, J., Holding, E., Ariss, S., Mukuria, C., Jacques, R., Akparido, R., & Haywood, A.

2020, UK

Link to article

Investigating the detrimental impact loneliness has on physical mental health, the authors analyzed the efforts of the British Red Cross, who developed and delivered a national social prescribing service in the United Kingdom to support people who were experiencing, or at risk of, loneliness. Service-users could receive up to 12 weeks of support from a link worker.

Data collected from 2017-2019 showed that the majority of the service-users (72.6%) felt less lonely after receiving support. Additional benefits included improved wellbeing, increased confidence and life having more purpose. The base case analysis estimated a social return on investment of £3.42 per £1 invested in the service.

Making Sense of Social Prescribing

Polley, M. J., Fleming, J., Anfilogoff, T., & Carpenter, A.

2017, UK

Link to guidebook

A guidebook backed by NHS England for designing, commissioning, running, and evaluating social prescribing iniatives. An academic article co-authored by Polley called "A review of the evidence assessing impact of social prescribing on healthcare demand and cost implications" helped inform this guidebook. Read here



Literature Review (continued)

Connecting communities: A qualitative investigation of the challenges in delivering a national social prescribing service to reduce loneliness

Holding, E., Thompson, J., Foster, A., & Haywood, A.

2020, UK

Link to article

These authors investigated the impact of large-scale social prescribing interventions to address loneliness. However, this article focuses more on the complexities of the link worker role, the challenges of service delivery and the importance of community infrastructure. There was evidence that highly skilled link workers who had developed positive relationships with providers and service-users were key to the success of the intervention. Successful link workers tailored the national programme to local need to proactively address specific gaps in existing service provision.

For social prescribing services to be successful and sustainable, commissioners must consider additional funding of community infrastructure.

What approaches to social prescribing work, for whom, and in what circumstances? A realist review

Husk, K., Blockley, K., Lovell, R., Bethel, A., Lang, I., Byng, R., & Garside. R.

2019, UK

Link to article

A review article that focuses on the processes of social prescribing initiatives, analyzing what does and does not work for participants. 109 studies contributed to the synthesis in the first phase, with a further 34 studies in the second phase. The authors generated 40 statements relating to organising principles of how the referral takes place (Enrolment), is accepted (Engagement), and completing an activity (Adherence), and explored effective processes that reinforce these three areas.

Understanding the effectiveness and mechanisms of a social prescribing service: a mixed method analysis

Woodall, J., Trigwell, J., Bunyan, A. M., Raine, G., Eaton, V., Davis, J., Hancock, L., & Wilkinson, S.

2018, UK

Link to article

A qualitative study investigating the outcomes of a social prescribing initiative in Northern England. 342 participants provided complete wellbeing data at the beginning and end of the initiative, and 26 semi-structured qualitative interviews were carried out. The authors concluded that social prescribing has the potential to address the health and social needs of individuals and communities, and is one way to support primary care.



Program Review

Links2Wellbeing

Alliance for Healthier Communities

2021-Present

Ontario

Links2Wellbeing builds on the pilot project, *RX: Communities*. The pilot ran from 2018-2020. with participants reported feelings of loneliness decreasing by 49%, with self-reported mental health improving by 12% and sense of community belonging increasing by 16%. *RX: Communities* report. The pilot also led to one of the first Canadian academic articles on social prescribing. Read here

Links2Wellbeing is made possible through a partnership between the Alliance for Healthier Communities and the Older Adults Centres' Association of Ontario (OACAO), where participating Community Health Centers and clinicians will be able to prescribe social programs offered at participating Seniors Active Living Centers. By increasing access to social prescribing for older adults and creating new links to social interaction, Links2Wellbeing aims to reduce barriers and rebuild capacity in local communities. These ongoing efforts to revitalize wellbeing and empower individuals will continue as the Alliance pushes forward to ensure no one is left behind throughout a post-pandemic recovery.

Tower Hamlets Social Prescribing

GP Care Group

2016-Present

UK

Social Prescribing is a Tower Hamlets service that aims to address the social factors affecting health and wellbeing by connecting local residents to the non-medical support available in the area. They aim to prevent the development of associated complications that affect mental health, empower residents to play an active role in their health and wellbeing, and improving the local offer as it relates to a person-centred view of health and wellbeing.

In the 2020-2021 financial year, they received over 8000 referrals to the service, with notable areas of concern being Financial, Housing, Mental Health, and Exercise/Healthy Eating.

Deal and Sandwich Social Prescribing

Deal and Sandwich Primary Care Network

2019-Present

UK

Deal & Sandwich Primary Care Network (PCN) is made up of five practices in Deal and Sandwich in East Kent. These practices came together to provide care and health services to their patients in new and innovative ways. One of their key methods to achieve this is through social prescribing. A PCN consists of groups of general practices working together and in partnership with community, mental health, social care, pharmacy, hospital and voluntary services in the local area, to offer more personalised, coordinated health and social care to the people living in their area.



Program Review (continued)

SOAR's Social Prescribing Service

SOAR Works 2014-Present UK

SOAR is a community regeneration charity that provides a range of services designed to improve a person's health, well-being, and employability. Their social prescribing service is one of the largest in Sheffield because they work in partnership with over 20 GP surgeries and over 40 community partners. Their team consists of social prescribing link workers, wellbeing coaches, welfare coaches, employment coaches, development, and volunteers.

The Social Prescribing Link Worker team triage referrals and carry out assessments over the phone or face-to-face, then use that information to signpost to a service that can best meet those needs.

They have supported more than 10,000 people since 2014.

Welfare on Prescription

Ministry of Health, Welfare and Sport

2012-Present

Netherlands

[Translated using Google Translate] Welfare on Prescription is provided by the Department of Healthy Living from the National Institute for Public Health and the Environment, an institutional subsidy from the Ministry of Health, Welfare and Sport. They work together with municipal/health services, regional support structures, home care organizations, health funds, education councils, sports service organizations, academic workplaces, Dutch Youth Institute, Netherlands Center for Youth Health, Dutch General Practitioners Association, National General Practitioners Association, Association of Dutch Municipalities, and various ministries.

At Welfare on Prescription, primary care providers such as general practitioners, practice nurses, physiotherapists and psychologists can refer their patients with psychosocial complaints (without somatic cause) to the welfare organization MOvactor. There the patient is partnered with a welfare coach.

Seniors Social Prescribing Program

Maple Ridge / Pitt Meadows Community Services

2021-Present

British Columbia

Community Services has been serving Pitt Meadows and Maple Ridge since 1971 with a multitude of programs and services. They run the Seniors Social Prescribing Program funded by United Way free of charge to referred users. They released a 2021 Annual Report which details the services they offer and their impact on the community. Read here