

SOCIAL PRESCRIBING

Evidence Bulletin

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Contents

NEW EVIDENCE	1
Additional Resources	17

NEW EVIDENCE

Bu, F., et al. (2024) 'Equal, Equitable Or Exacerbating Inequalities: Patterns and Predictors of Social Prescribing Referrals in 160 128 UK Patients.' *British Journal of Psychiatry* 1-9

BACKGROUND: Social prescribing is growing rapidly globally as a way to tackle social determinants of health. However, whom it is reaching and how effectively it is being implemented remains unclear. **AIMS:** To gain a comprehensive picture of social prescribing in the UK, from referral routes, reasons, to contacts with link workers and prescribed interventions. **METHOD:** This study undertook the first analyses of a large database of administrative data from over 160 000 individuals referred to social prescribing across the UK. Data were analysed using descriptive analyses and regression modelling, including logistic regression for binary outcomes and negative

binomial regression for count variables. **RESULTS:** Mental health was the most common referral reason and mental health interventions were the most common interventions prescribed. Between 72% and 85% of social prescribing referrals were from medical routes (primary or secondary healthcare). Although these referrals demonstrated equality in reaching across sociodemographic groups, individuals from more deprived areas, younger adults, men, and ethnic minority groups were reached more equitably via non-medical routes (e.g. self-referral, school, charity). Despite 90% of referrals leading to contact with a link worker, only 38% resulted in any intervention being received. A shortage of provision of community activities - especially ones relevant to mental health, practical support and social relationships - was evident. There was also substantial heterogeneity in how social prescribing is implemented across UK nations. **CONCLUSIONS:** Mental health is the leading reason for social prescribing referrals, demonstrating its relevance to psychiatrists. But there are inequalities in referrals. Non-medical referral routes could play an important role in addressing inequality in accessing social prescribing and therefore should be prioritised. Additionally, more financial and infrastructural resource and strategic planning are needed to address low intervention rates. Further investment into large-scale data platforms and staff training are needed to continue monitoring the development and distribution of social prescribing.

Campbell, D. (2024). *Consuming Arts and Culture is Good for Health and Wellbeing, Research Finds [online]*

Most people are familiar with the buzz that attending a memorable play, film, concert or art exhibition can trigger.

But now it is official: consuming culture is good for your health and wellbeing – and generates £8bn a year worth of improvements in people’s quality of life and higher productivity.

That is the conclusion of the first major UK research to quantify the impact the arts and heritage can have on physical and mental health and the monetary value of the advantages they bring. [20 Dec 2024]

Comachio, J., et al. (2024) 'Move to Improve - Prescribing Physical Activity and Deprescribing Paracetamol for Low Back Pain: Protocol for a Hybrid Type III Feasibility Study.' *BMJ Open* 14(12), e087614.

Introduction People experiencing low back pain (LBP) could potentially benefit from multimedia educational resources that integrate self-management strategies and improve awareness of the benefits of staying active and about medications that offer limited benefits, such as paracetamol. Primary care waiting rooms are potential spaces for presenting health promotion resources to improve health literacy through the dissemination of easily accessible health information. This feasibility study aims to explore the feasibility of conducting a large-scale trial to investigate the benefits of multimedia educational resources delivered at outpatient physiotherapy waiting rooms of public hospitals to support patients to participate in physical activity and reduce paracetamol intake for LBP.

Methods and analysis A hybrid type III feasibility study will be conducted at a public hospital in Sydney, Australia, from March to September 2024. The multimedia strategy development (pre-implementation) involves collaborative planning among healthcare professionals, policymakers and community stakeholders in physiotherapy practice. Phase II (implementation) will evaluate the

acceptability and implementation processes of delivering the multimedia educational resources in the physiotherapy waiting room following the RE-AIM (Reach, Effectiveness, Adoption, Implementation and Maintenance) framework. Findings from the quantitative data will be reported descriptively, and categorical data by counts and percentages. Qualitative (open-ended questions) will be integrated with the feasibility trial outcomes to inform the design of a full-scale randomised controlled trial. Ethics and dissemination This study has ethical approval from the Sydney Local Health District Human Research Ethics Committee (2023/ETH02683). The findings will be disseminated via peer-reviewed publications, articles in relevant newsletters and presentations at national and international conferences. Social media platforms including X will also be used to generate awareness.

Cooper, M., et al. (2024) 'Conceptualising Social Prescribing in Urgent and Emergency Care.' *Future Healthcare Journal* 11(4), 100199.

This paper examines how social prescribing could be implemented across urgent and emergency care (UEC) systems by examining potentially viable referral pathways and the salient challenges and barriers to implementation. In doing so, we consider a range of services involved in the broader UEC system to include emergency departments, emergency medical (ambulance) services, out-of-hours general practitioners, telephony-based urgent care, urgent treatment centres, and community pharmacy. This paper aims to encourage further debate on this topic, including around the nuances of UEC services that may influence implementation of social prescribing.

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Evers, S., et al. (2024) 'Survey of General Practitioners' Awareness, Practice and Perception of Social Prescribing Across Europe.' *The European Journal of General Practice* 30(1), 2351806.

Social prescribing (SP) is a patient pathway by which healthcare professionals connect patients with other sources of support, groups, or activities within their community. The awareness, practice, and perception of SP among GPs across Europe remains unclear.

To explore the awareness, practice, and perception of GPs on SP in the WONCA Europe region.

An anonymous, cross-sectional online survey was distributed through a snowballing system, mailing lists, and at three international conferences in 2022/2023 to explore GPs' awareness, practice, and perception of SP. The questionnaire in English contained 21 open and closed questions.

Of the 208 participating GPs from 33 countries, 116 (56%) previously heard of 'social prescribing' and 66 (32%) regularly referred patients to community activities through a formal system. These 66 GPs reported different funding sources and varied activities, with an average of four activities and physical exercise being the most prevalent. Among them, 25 (38%) knew about national or local SP awareness campaigns. Of these 25, 17 (68%) agreed that SP increases their job satisfaction and 21 (84%) agreed that it has a positive impact on their patients. Variations in SP awareness and referral practice were evident across and within countries.

Despite disparities in awareness and referral practice as well as a diversity of activities and funding sources, most GPs who actively referred patients and were informed about SP campaigns agreed that SP positively impacts them and their patients.

Featherstone, C., et al. (2024) 'Autistic Adults' Experiences of Managing Wellbeing and Implications for Social Prescribing.' *Disability & Society* 39(12), 3283–3311.

Autistic people demonstrate poor outcomes on objective measures of wellbeing, yet research centring lived experience provides a more nuanced picture. There is growing support for person-centred, holistic and community approaches to enhancing wellbeing for autistic people. Social prescribing may be one such approach. This qualitative study explored the concept of wellbeing for autistic adults – including barriers and self-management – and the implications of this for modifying social prescribing. It involved semi-structured interviews with 21 autistic adults in the UK. Reflexive thematic analysis of the data supports research suggesting that self-determination may underlie many aspects of wellbeing for autistic people. The COVID-19 pandemic provided new opportunities to develop wellbeing strategies but also had negative impacts. Social prescribing could promote self-determination by signposting autistic people to peer support opportunities building on intrinsic interests.

Ketibuah-Foley, J. (2024). Researchers Study Impact of Singing on Wellbeing [online]

More than 300 people have taken part in an experiment to discover if singing can improve mental health and wellbeing.

Researchers invited people to take part in Sing for Happiness which saw participants take part in choir sessions where data on mood was collected, culminating in a festive performance.

The study, run by St George's music venue in Bristol and the University of the West of England (UWE) in the run up to Christmas

aimed to build on the findings of a similar project in the summer. [23 Dec 2024]

McGregor, A. (2024). [Making Health Services Better with People Who are Neurodiverse](#) [online]

Alyson McGregor, Social Prescribing Network Steering Committee member and Director of Altogether Better was recently invited onto the Community Conversations podcast hosted by Sarah Fassihi from Central Cheshire Integrated Care Partnership.

Alyson spoke about Altogether Better and NHS West Yorkshire ICB's action research project to explore what would make neurodiverse people's experience of health services better. Through surveys, interviews and group workshops with neurodiverse young people, adults, family members and staff, data and insights were gathered which people worked together to interpret in order to understand how health services could build services that worked better for people. Alyson described how "the amazing thing about it is that the things that we learned wouldn't just improve things for people who were neurodiverse, they would improve services for everyone." The findings will be of little surprise to many of you but what is surprising is why, despite best intentions, primary care is falling short in delivering the services people need. [20 Dec 2024]

McMullen, S., et al. (2024) '[A Qualitative Exploration of the Role of Culturally Relevant Social Prescribing in Supporting Pakistani Carers Living in the UK.](#)' *Health Expectations : An International Journal of Public Participation in Health Care and Health Policy* 27(6), e70099.

Approximately 5.7 million people in the UK are providing informal care. Carers across all ethnic groups can experience negative

impacts on their physical and mental health but some minority ethnic groups face greater challenges. Higher levels of social isolation exist among Pakistani carers compared to White British carers, yet the needs of Pakistani carers and how well support services meet these needs is less well understood. Social prescribing can help people get more control over their health care in a nonmedical way. South Asian and other ethnically diverse populations are under-served in social prescribing and there is little evidence available on why this is the case.

To explore the potential role of culturally relevant and adapted social prescribing in assisting Pakistani carers and identify the cultural and religious influences and barriers on carer health behaviours.

Semi-structured one-to-one interviews with Pakistani family carers (n = 27) and social prescribing stakeholders (n = 10) living in London and Sheffield, UK. Participants were recruited through voluntary and community sector organisations (VCSOs), social media, religious organisations, and word of mouth. Interview data was analysed in NVivo using reflexive thematic analysis methods.

Two themes were developed; (1) Individual and community level influences: Navigating and accessing carer support within Pakistani communities, including carer identity and cultural barriers to accessing support provision, and cultural adaptation to facilitate support for Pakistani carer health and well-being, (2) societal and structural level challenges: Accessing and providing social prescribing for Pakistani carers, including funding challenges for the provision of culturally relevant carer support, integration of primary care and social prescribing, and enhancing cultural awareness and competence in social prescribing for Pakistani carers.

There are complexities surrounding carer identity, family dynamics,

stigma, and a lack of knowledge of social prescribing within Pakistani communities. There is a need for more culturally competent support, culturally relevant education, awareness-raising, and collaboration among primary care and VCISO's to better support Pakistani carers through social prescribing, which acknowledges and addresses the complexities.

The study included a patient advisory group comprised of two South Asian family carers who contributed towards all stages of the study. They provided feedback on study documents (topic guides and recruitment materials) and recruitment strategy, supported with translation of study documents and interpretation of the interview data, and helped with facilitation of our dissemination activities.

National Academy for Social Prescribing. (2024a). [New Report Calls for 'Social Prescribing Fund' \[online\]](#)

The National Academy for Social Prescribing (NASP) has published a new report, Envisaging a Social Prescribing Fund, which makes the case for a new fund that would support community activities, groups and services that benefit people's health and wellbeing.

The proposed England-wide fund of £1 billion over 10 years would bring together contributions from the public, philanthropic and private sectors, and provide vital long-term funding for community groups and organisations to meet the rising demand for their activities and services - key to tackling loneliness, reducing health inequalities and improving people's health.

The allocation of funds would be based on local health needs and could include support for evidence-based community projects for people who are struggling with their mental health, music-based

programmes for people living with dementia or exercise sessions to help prevent diabetes.

NASP suggests that bringing together funding in this way could lead to £100 million investment per year for 10 years. [20 Dec 2024]

National Academy for Social Prescribing. (2024b). *Proactive Social Prescribing Service for People with Respiratory Problems* [online]

Long-term respiratory problems, such as COPD or asthma, can lead to social isolation, exacerbate mental health issues and have a lasting impact on people's wider health. People living with these conditions can also become disconnected from services that could be supporting them.

The Proactive Social Prescribing service for people with respiratory problems was established by York CVS, a local charity, and the Humber and North Yorkshire NHS Integrated Care Board (ICB). It was designed to address the growing need for integrated care for people with long-term respiratory problems, connecting them to community support as well as the health system.

The programme proactively reaches out to:

People with long term respiratory conditions who are at high risk of non-elective admissions to hospital.

People who are isolated because of their poor respiratory health and related long-term conditions.

People with long term respiratory conditions who live in socially deprived areas or who are on low income.

The service aims to improve overall wellbeing, prevent escalations in health needs, and reduce reliance on emergency services. It was set up as a two-year programme from April 2023. [20 Dec 2024]

Papon V., et al. (2024) '[Development of a Social Return on Investment Study of Nature-Based Social Prescribing.](#)' *Value in Health Conference, ISPOR.*

Objectives: Loneliness is a significant public health concern with negative effects on physical and mental well-being. An upcoming approach to alleviate loneliness is called nature-based social prescribing (NBSP). We aim to study the social value generated by an investment in NBSP interventions.

Patil, M. K., et al. (2024) '[Integrating Social Prescribing in Dermatology Policy and Clinical Practice: Enhancing Care Beyond Medical Interventions.](#)' *Archives of Dermatological Research* 317(1), 126.

The field of dermatology faces significant healthcare disparities. Marginalized socioeconomic, racial/ethnic, and sexual/gender minority groups often face delayed diagnosis, suboptimal treatment, limited access to culturally competent care, and limited workforce diversity. Ample research and delivery interventions are underway to help address barriers to access and differences in care outcomes, such as new reimbursement strategies via Z-codes for management of social issues affecting health. Dermatologists should also look beyond traditional medical interventions to address these environmentally and socially driven aspects of dermatological diseases.

Social prescribing involves augmenting medical therapies by connecting patients to non-clinical services that address social and environmental factors contributing to their disease. Programs often employ social workers, or “link workers,” who provide personalized support by referring patients to community resources and activities

such as physical activity, arts and creativity, gardening, social groups, and other forms of social support. The model incorporates behavioral change interventions and informed decision-making, such as support groups and disease-specific advocacy organizations. Several social prescription models have demonstrated promising results, indicating significant improvements in participants' well-being, perceived levels of health, and social connectedness, along with reductions in anxiety

Rasmussen, L. G., et al. (2024) '[Social Prescribing Initiatives Connecting General Practice Patients with Community-Based Physical Activity: A Scoping Review with Expert Interviews.](#)' *Scandinavian Journal of Public Health* 14034948241299878

AIMS: The World Health Organization states that physical inactivity is one of the leading behavioural risk factors for disability and mortality in Europe. Social prescribing holds promise as a possible solution by connecting patients from general practice to community-based physical activity. Although research within social prescribing exists, the process of connecting general practice patients to community-based physical activity is not well investigated. This scoping review aimed to summarise and synthesise knowledge on social prescribing provided by health professionals in general practice towards community-based physical activity. **METHODS:** A systematic search for literature in PubMed, Embase, Scopus, SportsDiscus and other sources was conducted to identify initiatives connecting general practice to community-based physical activity. Semi-structured interviews were then conducted with subject-specific national experts. Finally, preliminary findings from the literature and the interviews were used in a co-creation process with experts to synthesise and finalise the results of a thematic analysis across data

sources. **RESULTS:** Based on 19 records, five expert interviews and subsequent co-creation, we identified three themes: (a) barriers and facilitators, (b) organisational perspectives and (c) value-based considerations. **CONCLUSIONS:** **This review illuminates the complex nature of social prescribing programmes that connect general practice patients to community-based physical activity in Denmark. It also presents practical and fundamental considerations when applying social prescribing across different settings.**

Sachs, A. L., et al. (2024) ['Developing a New Tool to Capture the Nature Dose to Reduce Loneliness and Improve Quality of Life.'](#) *MethodsX* 13, 102969.

Recognition of the health benefits of nature contact has increased. Simultaneously, growing numbers of people worldwide experience loneliness. There is a movement towards prescribing nature-based activities to improve/promote social connections, health, and quality of life. Yet, what constitutes a therapeutic nature dose is not well understood, due in part, to the lack of instruments that capture the characteristics of nature-based activities and measure 'nature dose.' We created a nature dose measurement tool to fill this gap by capturing various aspects of contact with nature and perceptions regarding park access, quality, naturalness, psychological distance to nature, and biodiversity. This tool will facilitate greater understanding of how natural areas, nature-based activities, and nature exposure reduce loneliness and promote health-related quality of life. Measuring nature dose with standardized tools and documenting benefits will generate the evidence base needed to design, implement and evaluate nature-based social interventions for

improving health and quality of life.*This tool captures the nature dose to reduce loneliness and promote quality of life.*Constructs range from park quality and access, to mood, to biodiversity perceptions.*The standardized nature dose tool will help design nature-based social interventions. Copyright © 2024 The Authors. Published by Elsevier B.V.

Simpson, M. (2024). [People with Mental Health Issues Offered Free Nature Course \[online\]](#)

PEOPLE with depression, anxiety or loneliness are being offered a free nature-based course aimed at improving their mental health. The move is part of the NHS's new drive on preventative medicine, with an emphasis on helping people to help themselves.

Community group Planet Purbeck has been awarded funding from NHS Dorset to conduct a pilot scheme in the local area.

And the result is a nine-week course called Thrive In Nature, run free of charge by wellbeing experts Sara Greenwood and Jane Woods.

[20 Dec 2024]

Taylor, D. A., et al. (2024) '[Community Pharmacist Involvement in Social Prescribing for Mental Health: A Qualitative Study.](#)' *Primary Health Care Research & Development* 25, e69.

We aimed to explore participant perspectives on social prescribing (SP) for mental health and well-being and the acceptability of community pharmacists (CP) as members of SP pathways that support people with mild to moderate depression and anxiety.

SP aims to support people with poor health related to socio-demographic determinants. Positive effects of SP on self-belief, mood, well-being, and health are well documented, including a return to work for long-term unemployed.

The study was set in a city in southwest England with diverse cultural and socio-demographics. We recruited SP stakeholders, including CP, to either one of 17 interviews or a focus group with nine members of the public.

An inductive iterative approach to thematic analysis produced four superordinate themes: (1) offering choice a non-pharmacological option, (2) supporting pharmacy communities - 'it is an extension of what we do', (3) stakeholder perspectives - pharmacists are very busy and their expertise unknown by some, and (4) potential for pharmacy in primary care. Stakeholders viewed CP as local to and accessible by their community. Pharmacists perceived referral to SP services as part of their current role. General practitioner participants considered pharmacy involvement could reduce their workload and expand the primary healthcare team. Importantly, general practitioners and CP viewed SP as a non-pharmacological alternative to prescribing unnecessary antidepressants and reduce associated adverse effects. All participants voiced concerns about pharmacy dispensing busyness as a potential barrier to involvement and pharmacists requesting mental health training updates. Key findings suggest CP offer a potential alternative to the general practitioner for people with mild to moderate depression and anxiety seeking access to support and health information. However, CP need appropriately commissioned and funded involvement in SP, including backfill for ongoing dispensing, medicines optimization, and mental health first aid training.

Vert C., et al. (2024) 'Evaluating the Feasibility of "Friends in Nature," a Complex Nature-Based Social Intervention to Address Loneliness and Quality of Life in Six Cities Worldwide.' *Pilot and*

Feasibility Studies 10(1) (pagination), Article Number: 146. Date of Publication: 01 Dec 2024.

Background: Loneliness, a major public health concern, could be alleviated through social interventions with nature contact as a primary component. "Friends in Nature" is a complex nature-based social intervention designed to be implemented as part of "Reimagining Environments for Connection and Engagement: Testing Actions for Social Prescribing in Natural Spaces" (RECETAS). This project aims to alleviate loneliness and promote health-related quality of life in six different geographic areas worldwide. Feasibility studies are crucial to assess the viability of complex interventions and study procedures before conducting definitive studies. This paper aims to describe the design, implementation, and evaluation of the six-related feasibility studies on the "Friends in Nature" intervention. These studies specifically evaluate feasibility of recruitment and study procedures, intervention implementation, and data collection and distribution.

World Health Organization. (2024). *WHO Designates SingHealth Community Hospitals as the World's First Collaborating Centre for Social Prescribing [online]*

Healthy ageing goes beyond merely increasing life expectancy—it focuses on empowering individuals to achieve and engage in what they value most. The World Health Organization (WHO) defines healthy ageing as 'the process of developing and maintaining the functional ability that enables well-being in older age.' Functional ability is influenced by an individual's intrinsic capacity, the features of their environment, and the dynamic interaction between them. Therefore, fostering supportive environments where older adults can

thrive is crucial for healthy ageing. Social prescribing—a model connecting individuals to non-clinical community services—has emerged as a critical tool for addressing social determinants of health, loneliness, mental health, and social inclusion. In Singapore, this approach is gaining momentum, fostering a continuum of care for patients while helping them rediscover their sense of purpose and build meaningful connections through active community engagement.

[17 Dec 2024]

Additional Resources

- **The Knowledge Network** [Search for more information](#)
- **NHS Highland and Social Prescribing** [Learn more](#)
- **NHS England and Social Prescribing** [Learn more](#)
- **The King's Fund and Social Prescribing** [Learn more](#)
- **Careers in Social Prescribing** [Learn more](#)
- **National Association of Link Workers** [Learn more](#)
- **National Academy for Social Prescribing** [Learn more](#)

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