

Social prescribing – who does it work for and why?

October 10 2019, by Amy King

In a time when people are living longer, but with more complex healthcare needs, GPs are increasingly using social prescribing to help manage conditions.

The practice involves prescribing non-medical, community or [social activities](#) via a link worker—and the current UK Secretary of State for Health and Social Care, Matt Hancock, has stated that social prescribing is a priority and will be available in every GP practice by 2024.

But researchers agree there is not enough evidence on what works, for whom and why. Now a new study by the Universities of Plymouth and Exeter has started to shed light on the subject.

The research, published in the journal *Health and Social Care in the Community*, highlights the fact that social prescribing is not a single intervention but a series of relationships, all of which need to function. It also highlights the vital role of a link worker in ensuring that the social prescribing process has the best chance of success.

The research took the form of a realist review: identifying existing studies and developing 'if-then' statements to ascertain how social prescribing models are expected to work, then clarifying these mechanisms with broader evidence.

Lead author Dr. Kerry Husk, Senior Research Fellow at the University of Plymouth and supported by PenARC—the National Institute for

Health Research (NIHR) Applied Research Collaboration South West Peninsula—said:

"Given the significant popularity of social prescribing we need more evidence on what works. It's not a case of 'one size fits all' or even 'x intervention will work for y person', it's a case of examining the process as a whole and ensuring that everyone is aware of the key components to give an intervention the best chance of success.

"I think the most important finding from our review was that the role of the link worker is really important to stop the process from being disrupted. If their involvement or engagement with the patient is diminished, it affects the success of the whole. There is more work to be done in finding evidence for the success of social prescribing, especially as many more GPs in England are starting to utilise it within their work.

"It's a long and complex road that is vital to understand if the [health](#) service wants to work towards patient-centred care, but it's a subject we're definitely keen on pursuing as part of our work in the Community and Primary Care Research Group at the University of Plymouth."

The full study, titled "What approaches to social prescribing work, for whom, and in what circumstances? A realist review," is available to view now in the journal *Health and Social Care in the Community*.

More information: Kerry Husk et al. What approaches to social prescribing work, for whom, and in what circumstances? A realist review, *Health & Social Care in the Community* (2019). [DOI: 10.1111/hsc.12839](https://doi.org/10.1111/hsc.12839)

Provided by University of Plymouth

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