

Social prescribing for suicide prevention

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Social prescribing involves the referral of patients to non-clinical care to address or prevent adverse effects of the social, environmental and economic factors that are inextricably linked with health and well-being. These are commonly referred to as the social determinants of health.

Social prescribing recognizes that improving and managing health requires more than clinical care. It also acknowledges that [health professionals](#) do not necessarily have the expertise, resources or time to address all these needs.

This new form of prescribing enables health professionals to refer patients with social or practical needs contributing to [poor health](#), to a community provider of nonclinical service. This enables a wider range of options for care and management to be provided at the primary care level.

Social prescribing models have been developed in the U.K., Europe, the U.S., Canada, New Zealand, Scandinavia, Asia and Australia. In Australia, there are a small and growing number of practice or area-based programs in several states. There is currently a trial of social prescribing to support [mental health](#), particularly for [older people](#), in Victoria following recommendations by the Royal Commission into Victoria's Mental Health System.

A 2019 roundtable on social prescribing, hosted by the Consumers Health Forum together with the Royal Australian College of General Practitioners (RACGP), made recommendations for incorporating social prescribing into future health system planning and service delivery strategies. Broadly, social prescribing programs in Australia have included [physical activity](#), allied health or community group referral, community group and programs addressing the social determinants of health.

Through an exploration of various databases, including MEDLINE, PsychInfo, WILEY, and Sage, a total of 3,063 articles were initially identified as potentially relevant to the research. Following a meticulous screening process, 13 articles were included in the final [review](#), now published in *Frontiers in Public Health*.

The review of the literature highlights the importance of social capital and trust among vulnerable populations, underscoring the significance of community-based referrals in suicide prevention initiatives.

Key findings indicate the need for additional monitoring and support for individuals at risk of suicide, emphasizing warm referrals and sustained connections to enhance efficacy.

Overall, this review identifies the potential of social prescribing as a valuable tool in mitigating suicide risk factors and promoting mental health and well-being in diverse populations.

More information: Sarah Dash et al, Social prescribing for suicide prevention: a rapid review, *Frontiers in Public Health* (2024). [DOI: 10.3389/fpubh.2024.1396614](https://doi.org/10.3389/fpubh.2024.1396614)

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