National Academy for Social Prescribing

Response to the consultation for the *Young People and Work* Report from the National Academy for Social Prescribing.

Overview

This response, from the National Academy for Social Prescribing (NASP), focuses on what would make the biggest difference to support more young people to participate in employment, education or training (Question 2). Specifically, we agree with the 2024 report from the NHS Confederation, *Improving our nation's health,* that social prescribing can support young people starting out on their careers to build confidence, skills and social networks, along with pathways to employment. It can also help people at risk of leaving the workforce due to health conditions to remain at work, and help people who have become unemployed due to health conditions to re-enter the workforce. By taking a personalised approach, social prescribing can address the complex and diverse factors affecting health and wellbeing that might contribute to young people being, or remaining, not in education, employment or training (NEET). In England, the social prescribing ecosystem is supported by NASP. We are already working with DWP to explore how social prescribing can reduce economic inactivity, and we welcome the opportunity to work with the review team to examine its role in addressing the growing number of young people who are NEET.

What is social prescribing?

Social prescribing was included as part of the NHS Long Term Plan for England in 2019. This led to the recruitment of Social Prescribing Link Workers across England, who work as part of primary care teams. Referrals to link workers can come from GPs, other healthcare professionals, local community organisations and others.

Link workers spend time understanding the social issues affecting a patient's health, then connects them into community-based support or sometimes provide the support themselves. For example, they may support someone to access benefits and housing support, to become more physically active or to join a group or activity that tackles loneliness. They may also provide employment advice or connect patients into volunteering opportunities that can build valuable skills and confidence, and which in turn can support young people to access training, education or employment.

While many social prescribing services offer an all-age model, there are also specialist young people's link workers in some areas. Link workers are usually based in GP practices or in local voluntary sector organisations, but some social prescribers or 'community connectors' for young people also work in schools or hospitals.

While link workers are the role most associated with social prescribing, other trusted adults can be trained to take a 'social prescribing approach' - in other words, understanding what matters to the young person; co-developing a plan to meet their non-medical needs; and supporting them to access community organisations and other resources.

Social prescribing is already one of the elements in the Government's WorkWell pilot that has supported disabled people and people with health conditions to receive support to stay in and re-enter the workplace. This approach is being rolled out nationally this year. The *Keep Britain Working Review* published in Autumn 2025 highlights social prescribers as one of the foundations for the *Workplace Health Provision* that it recommends.

How can Social Prescribing support young people who are NEET?

A recently published global review of young adults found that NEET status is associated with long-term socioeconomic disadvantages, including lower educational attainment, higher unemployment rates, and increased mental health risks. Low self-esteem, depression, and social isolation are common consequences and make it more difficult for young people to participate in education, employment and training. Interventions targeting young people who are NEET must account for the complex, multifaceted factors contributing to them being NEET. These include low educational attainment, economic disadvantage, family unemployment, single-parent households, and mental or physical health challenges (see Marques *et al* 2025 and references therein).

By taking a personalised approach, a social prescribing can support the NEET cohort to address the complex and diverse factors affecting their health and wellbeing that might contribute to them being (or remaining) NEET. It can address the impact of their NEET status on their mental health, financial status and connection into society, and it can help to build skills and confidence that help them to enter training or employment.

In terms of the impact factors highlighted in the consultation, social prescribing can:

- connect young people into their communities and places;
- connect them into activities that increase their aspirations and self-esteem, and which help them feel more positive and in control;
- support young people at key transition points;
- help young people affected by a range of adverse childhood experiences.

The evidence for social prescribing

There is increasing evidence for social prescribing being able to address a number of barriers – like poor mental health – that prevent young people moving into education, training and employment. Research primarily on adults (but including young adults) includes:

- A major NIHR-funded study led by Manchester University showed that an additional full-time equivalent link worker per 50,000 patients was associated with higher probabilities of patients having confidence in managing long-term condition(s) and of patients with mental health needs feeling like these were understood.

- A two-year cross-government programme looking at the impact of green social prescribing supported 8,300 people with mental health needs to access nature-based activities. More than 50% of participants were from the most socio-economically deprived areas, and 21% of participants were from ethnic minority populations. Outcomes included statistically significant improvements in levels of anxiety and life satisfaction – the latter estimated to provide a return on investment of £2.42 for every £1 invested by central Government.

As we highlight below, there is a need for more research on the value of social prescribing for young people, but relevant studies include:

- A peer-reviewed study of young people who were NEET in Italy and Portugal that has shown that:
  - Social prescribing improved mental wellbeing, especially for women, 16-24 year-olds and those more vulnerable at baseline.
  - Psychological distress scores moved from clinical to non-clinical after intervention.
  - Link workers' trust-based support enhanced self-esteem, confidence, social skills and agency.
  - Social prescribing acted as a 'social cure,' fostering stability and emotional resilience.
  - Some young people felt that the support they received from link workers in finding employment and going back to school led them to find renewed purpose in their life.

- A recently completed trial of Social Prescribing for young people, age 11-18, on the CAMHS waiting list by UCL showed improvements in total mental health difficulties alongside increases in prosocial behaviours amongst the young people who received social prescribing. The social prescribing group also had a significant increase in their resilience. These results suggest that social prescribing could be an effective tool in helping support young people's mental health in specialist settings whilst they wait for treatment.

- A scoping review published in 2025 by Muhl *et al* highlights other key studies from the academic and grey literature.

Examples of community activities that support young people who are NEET and/or could prevent them becoming NEET

We have recently published a number of case studies showing how a social prescribing approach, and the activities that social prescribers connect young people to, can support children and young people's mental health. These approaches can help build the confidence of young people who are NEET; support young people at key transition points; and help young people who have experienced a range of adverse childhood experiences that may contribute to them being NEET.

These are two other examples of initiatives have specifically looked at employment:

- Our Bright Future was an innovative partnership led by The Wildlife Trusts which brought together the youth and environmental sectors. It ran from 2016 to 2023 and included 31 projects across the UK. Young people were consistently found to be more confident, more skilled, happier and more able to find work through their involvement in the programme. The key outcomes for young people were:
  - Improved mental health and wellbeing
  - Increased self-esteem and self-confidence
  - New skills and knowledge
  - Increased employability and enhanced or influenced career aspirations

- The Box Careers programme initiated by Bristol's Empire Amateur Boxing Club combines boxing with support to shift mindsets, and access to career opportunities. Of the 218 young people participating in their programme in 2013, 75 individuals progressed into employment, training or further education and 71% felt more positive about their future career.

There are a large number of positive community initiatives that can support young people's mental health – for example, schemes run by charities or youth clubs. However, these initiatives may not always be well enough joined up to the NHS, or to each other. Funding for these activities can also be short-term and fragmented. When dedicated social prescribing link workers have capacity, they can map local community assets that are appropriate to young people and identify gaps.

Key actions to spread and scale social prescribing for children and young people

Scaling up and targeting a social prescribing approach to support young people who are (or are at risk of becoming) NEET is a fresh approach to this societal

imperative. There is an opportunity to scale up existing infrastructure (e.g. link workers and community connectors) to support young people to reengage with education, or enter training or employment. This could harness and build on the support and resources already provided by NASP.

Some of the factors that would support spread and scale, including those highlighted in our recent report, *Connected to Thrive*, are listed below.

- **Embed children and young people's social prescribing in national strategies and partnerships**.
    - Establish a cross-sector Children and Young People's Social Prescribing Partnership to advise on policy and strategy, harnessing the expertise of youth and mental health organisations and working with a range of Government departments.
    - Involve children and young people (with particular attention to those from marginalised groups) in social prescribing at all stages, from strategy to service commissioning and delivery.

- **Grow and support a strong and diverse workforce**
    - Ensure that every area has a specialist Children and Young People's Link Worker, as part of a neighbourhood health service, working as part of a multidisciplinary team. The 2026 Future Minds campaign *Roadmap to transform children and young people's mental health by 2035* also calls for social prescribing expansion to be focused on children and young people, with dedicated link workers in every primary care network and the creation of pathways to NHS-funded wider provision of social prescribing options.
    - Ensure more professionals who work with children and young people are equipped to take a "social prescribing approach" - i.e. to offer young people or families a personalised approach and connect them to services, activities and groups in the community, based on their personal circumstances and preferences.
    - Underpin this with appropriate training and standards. See also NASP's training and development review.

- **Invest in social prescriptions for children and young people**
    - Ensure long-term investment in community-based activities and services designed to support young people's mental health, free at the point of access. This could include implementing the recommendations of the Future Minds' 2025 report to reverse cuts to local authority funding for youth services and public health, and taking a shared investment approach for social prescribing programmes.
    - Support organisations delivering social prescriptions through investment and training and exploring trusted provider initiatives.

As with all interventions, especially those designed to address complex challenges, **research and evaluation are key to support the development and spread of good practice**. Published after our report, the Government's National Youth Strategy committed to exploring options for how social prescribing can be integrated into community youth care and included a commitment to research.

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30 January 2026

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