



Social Prescribing for Older People A summary of findings from our recent questionnaire

Introduction

During the summer of 2022, the National Academy for Social Prescribing, in partnership with Independent Age, undertook a questionnaire to produce a snapshot of social prescribing for older people.

The questionnaire aimed to understand what social prescribing for older people currently looks like, with a particular focus on what makes it work well, and what can cause challenges.

We received 131 responses to the questionnaire that contained data for us to analyse. Nearly half of the responses were from link workers, community connectors or professionals delivering social prescribing activities. We had some responses from older people who had taken part in social prescribing, or their family carers.

The findings gave us rich insights into social prescribing for older people, helping us to understand what services are available and how they are accessed, as well as who social prescribing might not yet be benefiting. However, we also recognise the limitations of these findings - mainly, that they represent a general national picture, and that local circumstances are likely to differ from place to place. Most importantly, we recognise that each person is an individual, with their own unique and diverse needs and preferences, and that social prescribing must reflect that.

Therefore, these findings are a helpful starting point as we develop our work for older people, but there is more listening and learning that we need to do - especially from older people themselves, in particular those facing poverty and from marginalised communities, in order to understand how social prescribing can truly meet their needs.

Findings

Common challenges facing older people that social prescribing could help with

- Loneliness and social isolation
- Financial wellbeing
- Life stage transitions (bereavement, caring duties, recovery, retirement)
- Social determinants (employment, housing)
- Ageism (stereotypes, negativity about ageing)
- Mental health conditions (anxiety, depression, stress)
- Complex long-term conditions
- Frailty (falls)
- Dementia

What helps social prescribing for older people to be successful?

- Adequate support for attending activities, such as buddies
- Personalised approaches to social prescribing that focus on the unique individual
- Ensuring activities are accessible, such as providing transport or activities that are culturally diverse, inclusive and flexible





- Developing trusting relationships between participants and social prescribers, for example link workers or community connectors
- Ensuring social prescribing empowers older people, by focusing on personal strengths, abilities and purpose
- Ensuring social prescribing activities and organisations have long-term sustainability
- Taking a holistic approach to social prescribing that includes access to statutory services and supports a range of health and social needs with a variety of offers
- Developing local knowledge about the voluntary, community, faith and social enterprise sector
- Developing an effective social prescribing system with local partnerships dedicated to supporting the needs of older people

What can be a barrier to social prescribing for older people?

- Information shortages about the benefits and purpose of social prescribing, and activities that are available locally
- Internalised stigma about needing support or accessing services
- Financial challenges such as the cost of attending or delivering activities
- Limiting stereotypes about ageing or abilities that exclude older people
- Lack of confidence about participating in activities, especially worries about socialising
- Limitations with community infrastructure such as the availability of activities
- Limitations with the social prescribing system such as being referred to a link worker or an activity

What gaps are there in social prescribing provision for older people?

- Actively promoting equality, diversity and inclusion through social prescribing
- Ensuring social prescribing design and delivery is informed by evidence of 'what works well'
- A broader variety of social prescribing activities, information and resources
- Personalised support, such as staff with specialist skills to support older people with complex needs
- Designing social prescribing in consultation with older people

What opportunities are there for social prescribing for older people?

- A greater focus on preventing ill health, such as timely support for those experiencing particular social or health related challenges
- Supporting care home populations with social prescribing, including residents, family carers and staff
- Developing commissioning approaches to encourage longer-term funding and collaboration between organisations
- Developing a strategic framework for social prescribing for older people, to outline what good looks like

Next steps

The findings from this questionnaire will inform the next steps of our work.

In particular, we recognise that we need to do more to engage with older people, especially those from locations, groups and communities who are likely to experience higher levels of poverty and inequality.

Our future work will focus on understanding and meeting the needs of older people from marginalised groups, including those who are not currently involved with social prescribing or the health and social care system more widely.