Physical activity is key to social prescribing model approach

Physical activity key to social prescribing model approach. New paper calls on leadership and policy to deliver significant change

Sixty leading health specialists and politicians have joined calls for an overhaul to Scotland's approach to social prescribing — with an urgent need to step up physical activity interventions.

Movement for Health (MFH) — a coalition of charities that includes SAMH, Age Scotland, and Paths for All — brought together professionals to understand the importance of supporting people to engage in physical activity and interventions through social prescribing models, revealing the findings in a new paper.

Social prescribing which typically sees GP practices and health services connect people to activities, groups and services has been embraced in certain areas of Scotland, with uptake varying considerably by region.

A key MFH recommendation is to create better community links and remove the assumption that social prescribing is a medical approach. This should in turn reduce reliance on other services and people seeing GPs about social issues. However, it's not a simple change as many people have a trusting

relationship with their GPs and is a safe go to when they don't know where to turn.

Dr Emma Lunan, Chair of Movement for Health, said: "Scotland has a health emergency and our approach needs to change.

"A social prescribing postcode lottery exists — and it often comes down to the strength of the links between health services and the surrounding community.

"We need to be able to translate policy into actions. Physical activity has huge benefits that go deeper than just physical and mental health. Proactive interventions can help individuals reconnect with their community and grow in confidence but many experience barriers when taking the first step so we need to work collaboratively to overcome these.

"Once the structure is designed, it will need continual scrutiny to ensure it is working effectively and providing tangible outcomes as society continues to change."

Maree Todd MSP, Minister for Public Health, Women's Health and Sport, attended the MFH event as both a keynote speaker and a participant in the panel debate that was chaired by health and care journalist Pennie Taylor and opened by the Chair of Movement for Health, Dr Emma Lunan.

The discussion highlighted a real lack of recognition for this workforce who are often managing people with complex needs. Currently, Scotland's approach to social prescribing is lagging behind Wales, England, and Northern Ireland although Humza Yousaf, Cabinet Secretary for Health has committed to exploring appointing a lead for social prescribing for Scotland.

The benefits are clear; from supporting patients' physical and mental health, to reducing health inequalities in local communities, while reducing the workload of frontline health professionals.

Taking part in local activities also helps build the skills and confidence to improve social functioning, leading to the reduction of social isolation and loneliness while creating more connected and resilient communities.

Dr Emma Lunan added: "Community empowerment was a central theme of the debate. It plays a vital role when linking patients to sources of support and networks.

"Greater control needs to be transferred to link workers in order to provide a direct relationship between health care and communities. This would ensure long-term solutions can be implemented rather than quick non sustainable alternatives."

Currently, social prescribing in Scotland is supported by two networks: Scottish Social Prescribing Network (SSPN) and Scottish Community Link Worker Network (SCLWN). Both networks share learnings, information and good practice across different initiatives while championing the need for a national approach and joined up thinking across all local authority areas.

The approach can fall under several ministerial portfolios which makes the desire for the Scottish Government to identify a lead important to deliver real change for communities and individuals.

Alison Leitch, co-chair of <u>Scottish Social Prescribing Network</u> and Community Link Worker Assistant Service Manager for Edinburgh, said: "The networks build on the strengths, drive and enthusiasm from various social prescribing programmes across the country, with the collective aim to embedded the approach in health and social care in Scotland. These strengths could assist with ensuring that policy objectives can be measured, evaluated and reported on in a cohesive manner."

The SSPN and CLW Network are well established networks and the go to body of knowledge in terms of social prescribing and

link working in Scotland.

Clare Cook, Project Manager at SPRING Social Prescribing, said: "It is widely recognised that community groups and services can respond more quickly to local needs than statutory services and have less barriers attached to them which encourage engagement.

"Often a little hand holding in order to build a person's confidence or provide some reassurance along with good local knowledge goes a long way. Statutory services are under too much pressure to offer this currently yet social prescribing presents a host of benefits to individuals, communities, healthcare and Government."

The full Movement for Health coalition includes: Age Scotland, Health and Social Care Alliance Scotland, Alzheimer Scotland, Breast Cancer Now, British Lung Asthma and Lung UK, Chest Heart & Stroke Scotland, Diabetes UK, Macmillan Cancer Support, MS Society, Parkinson's Scotland, Paths for All, RNIB, SAMH, Scotland Versus Arthritis, Stroke Association, VHS, Waverly Care, Scottish Disability Sport and Community Leisure Scotland.

With four key missions, Movement for Health is working towards raising awareness within health practitioners, physical activity and sport providers, policy makers and the general public, by providing research, resources and political action to support those who are affected to get more active.

