

SOCIAL AND NATURE PRESCRIBING: CONSIDERATIONS FOR HEALTH AND ENVIRONMENT

Why • The Case for Change
What • The Tools for Change
How • The Strategy for Change

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Canada

CASCADES

CISP Canadian Institute
for Social Prescribing

Anchored by
Canadian
Red Cross





NAVIGATION



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INTRODUCTION

This playbook offers practical guidance and considerations for integrating social and nature prescribing into healthcare practices, fostering community partnerships, promoting high-impact programs, and better understanding the potential for environmental co-benefits of these programs. It is intended for health care providers, program administrators, link workers, researchers, educators, and anyone else interested in better understanding the environmental co-benefits of social and nature prescribing.

Developed in collaboration with the Canadian Institute for Social Prescribing (CISP), a national hub anchored by the Canadian Red Cross, this playbook builds on a literature review and expert guidance to connect healthcare, social services, and community supports for improved health and well-being.

The playbook aims to:

- Provide background information, resources, and considerations for guiding social and nature prescribing practices.
- Highlight how nature prescribing, as a variation of social prescribing, can generate significant environmental co-benefits.



Suggested citation

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GUIDE TO ACTION

This playbook is a practical resource designed to inspire and guide action in advancing social and nature prescribing for improved health and environmental outcomes. It offers readers a clear roadmap to integrate equity-focused, patient-centered approaches, raise awareness of healthcare providers' roles, and promote the critical contributions of link workers.

By fostering partnerships with community and environmental stakeholders, emphasizing the health benefits of nature exposure, and connecting people to nature through social prescribing, this guide empowers individuals and organizations to make meaningful change. Finally, it encourages the measurement and communication of the environmental impacts of social prescribing, ensuring a sustainable and impactful approach.

KEY ACTIONS

Use equity-focused health promotion approach by co-creating with patients →

Enhance awareness of healthcare providers' ability to implement social prescribing →

Understand and promote the role of the link worker →

Partner with key players on programs with community and environmental benefits →

Understand and promote the health benefits of nature exposure →

Connect people to nature through social prescribing →

Assess and publicize metrics on the environmental impact of social prescribing →





ACKNOWLEDGEMENT

We acknowledge that this playbook draws largely on knowledge from a Western worldview. Throughout history and into today, Indigenous Peoples have nurtured holistic approaches to health and well-being, understanding that being well encompasses physical, mental, emotional, and spiritual dimensions. Further work is needed to learn and collaborate on solutions that draw on the Traditional Knowledge, and social and environmental adaptability, of Indigenous Peoples in Canada.

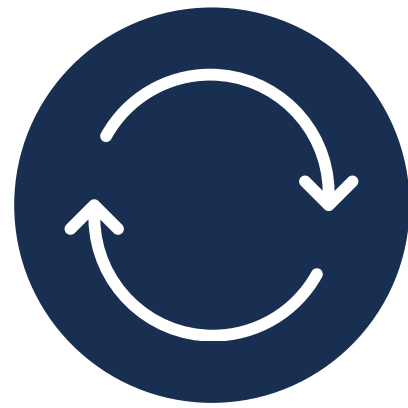
We also acknowledge that Canadian healthcare systems occupy the traditional territories of more than 630 Indigenous communities. Health inequities experienced by First Nations, Inuit and Metis Peoples are a result of narratives, policies, and practices perpetuated since the time of colonization to the present. Despite the enduring impacts of colonization, including forced displacement, cultural suppression, and systemic inequities, Indigenous Peoples continue to reclaim and revitalize their traditional knowledge systems and healing practices.

We acknowledge our shared responsibilities to advance reconciliation in meaningful and action-oriented ways. Guided by the [United Nations' Declaration on the Rights of Indigenous Peoples \(UNDRIP\)](#) and the [Truth and Reconciliation Commission \(TRC\) of Canada Calls to Action](#), we honor these frameworks as starting points for our journey. This includes respecting and upholding Indigenous rights, self-determination, and sovereignty, as well as co-creating and sustaining ongoing respectful relationships that nurture intergenerational health equity and well-being, rooted in the guidance of Indigenous knowledge systems and worldviews. Through collaboration, listening, and learning, we aim to contribute to a future built on justice, equity, and mutual respect.





PLAYBOOK STRUCTURE



WHY

The Case for Change

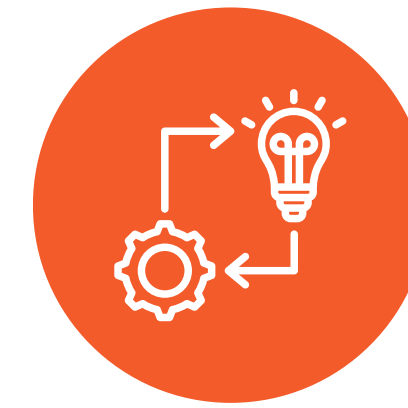
An introduction to the issue being addressed in the playbook



WHAT

The Tools for Change

A structured presentation of the opportunities for action and resources to plan and implement change

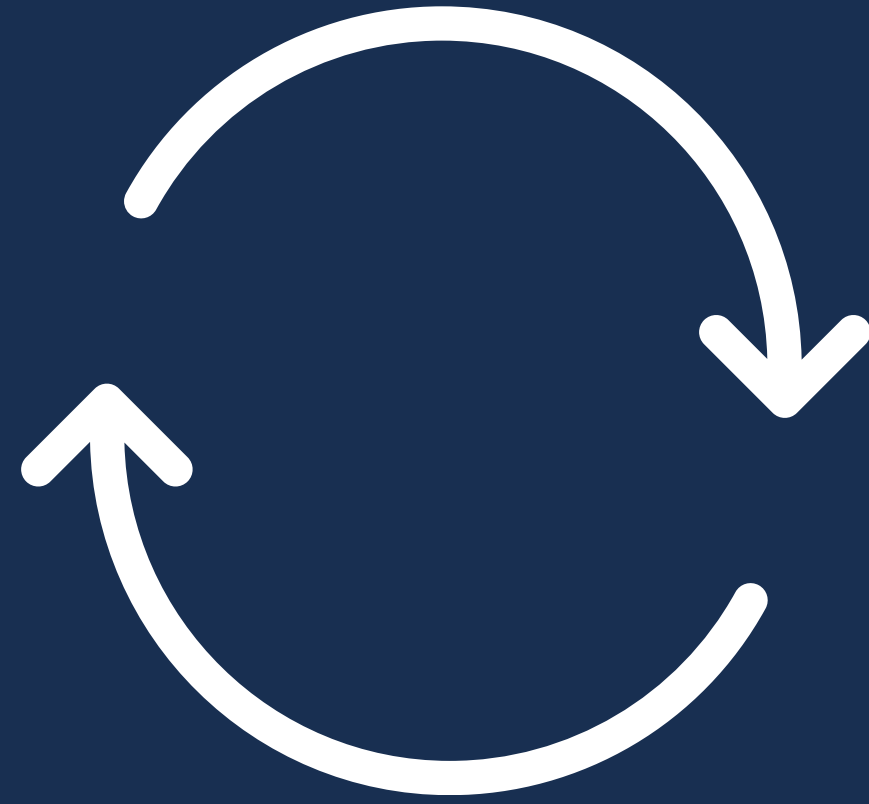


HOW

The Strategy for Change

An outline of strategies for sustaining change





WHY

The Case for Change

- 1 Climate Change and Health
- 2 About Social Prescribing
- 3 Who is Social Prescribing for?
- 4 Environmental Co-Benefits





Climate change and health



Climate change is a public health threat that amplifies existing health inequities, posing significant impacts to population health outcomes (1). The pathways through which climate change affects health inequities are complex and dynamic, involving a person's social determinants of health - the non-medical conditions and factors in which people are born, grow, work, live and age (2).

Climate change impacts everyone, from children to older adults, disproportionately affecting communities made vulnerable through systems of oppression (3). Alongside the potentially devastating direct impacts of climate change, and climate-related events, there is also growing attention to the indirect impacts to mental health, which in addition to impacting general well-being, contribute to higher economic costs to society (4).

Health systems have the opportunity to implement climate change mitigation and adaptation strategies that support the transition to environmentally and socially sustainable communities (5). Similar to other health-promoting strategies to address the social determinants of health, thoughtfully addressing climate change includes recognizing the value of strengthening community resilience (2).

Rooted in a collective impact approach, social prescribing focuses on integrating community capacity and healthcare services together by addressing issues such as loneliness, social isolation, racism, ageism, income, and housing.

Examples of social prescriptions include educational classes, food subsidies, cultural engagement opportunities, peer-run social groups and nature-based activities (sometimes referred as green social prescribing, nature-based social prescribing or nature social prescribing).

SOCIAL PRESCRIBING

“Social prescribing is a means for trusted individuals in clinical and community settings to identify that a person has non-medical, health-related social needs and to subsequently connect them to non-clinical supports and services within the community by co-producing a social prescription - a non-medical prescription, to improve health and well-being and to strengthen community connections” (6)

RESOURCES

- Social Prescribing Networks
- [International Social Prescribing Collaborative](#)
 - [Canadian Institute for Social Prescribing](#)





About social prescribing



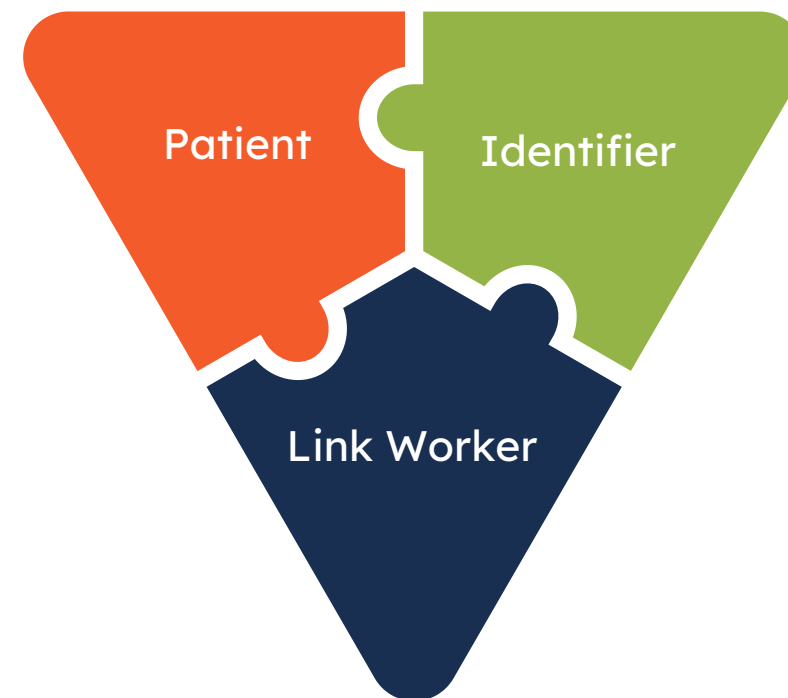
HISTORY

The practice of connecting individuals to community programs and services has been long considered an empowering strategy for improving health and well-being. As currently conceived, social prescribing originated in the UK, and has been known by a range of similar names, such as “community referrals” (7). Globally, social prescribing has gained traction in over 17 countries, including South Korea, Germany, Denmark, Singapore, and New Zealand (8).

The practice of social prescribing is an emerging grassroots movement in Canada (9). While relatively few Canadian programs use the term “social prescribing” to describe their work, many incorporate components of the social prescribing approach, with a “focus on connecting individuals to non-clinical supports that provide a person-centred approach to improving their health and well-being” (6). Global trends in healthcare indicate the importance of person-centred care that is comprehensive across the life-course, linking the potential that social prescribing holds for a sustainable health system (8).

SOCIAL PRESCRIBING PATHWAY

The essential elements of any social prescribing initiative are identified through co-production between three key players: the patient, identifier, and link worker. It is important to note that the social prescribing pathway is tailored to local capacity, and it may look different across jurisdictions (10).



Patient: Sometimes referred to as a ‘client’, ‘participant’ or ‘user’. The patient is an individual experiencing social and medical needs. A core component of social prescribing is inviting patients to co-create solutions based on their needs and interests.

Identifier: Identifies the patient’s need is non-clinical, and provides or prescribes the referral to a social/nature prescription or to a Link Worker. The identifier can be a health care provider, community services, a care giver, or other, and could involve self-referral.

Link Worker: Sometimes known as the ‘community connector’, ‘community navigator’, ‘well-being navigator’, or ‘link ambassador’. Link workers may be non-clinical health/social care professionals that help navigate the system across the continuum of care settings.

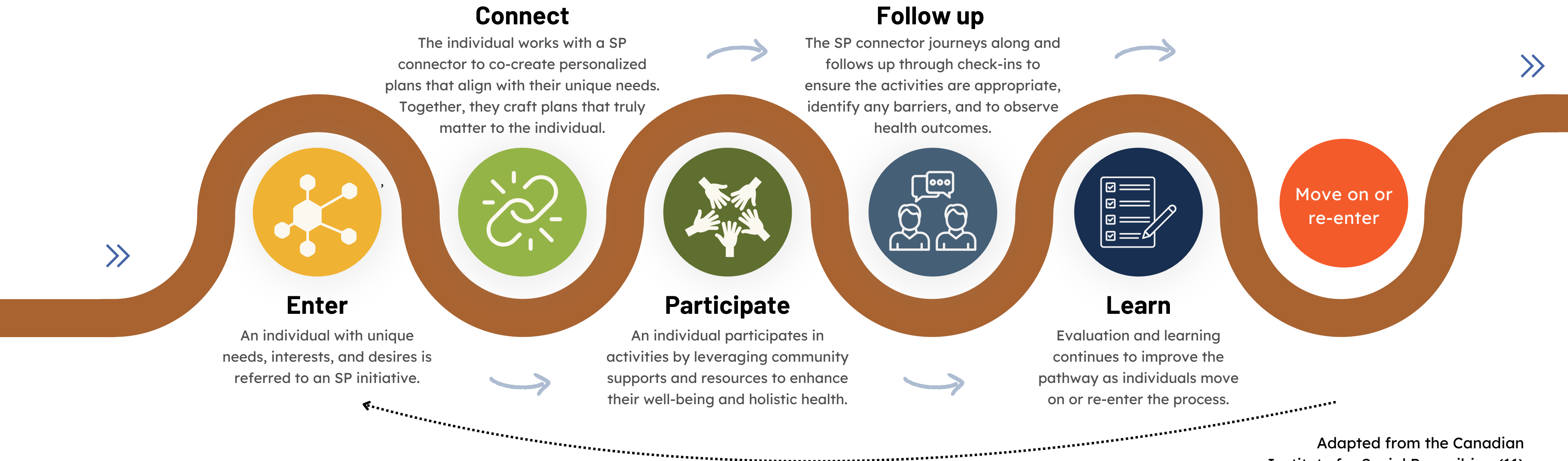




SOCIAL PRESCRIBING PATHWAY, CONTINUED

There are different referral pathways for social prescribing, including signposting patients to a service, as well as developing a relationship that connects individuals to supports that are co-produced, where they are empowered to take control and self-manage their care. In Canada, the Canadian Institute for Social Prescribing describes the social prescribing pathway in five distinct stages: Enter, Connect, Participate, Follow-Up and Learn (11).

Figure X: The social prescribing pathway



Adapted from the Canadian Institute for Social Prescribing (11)





Who is social prescribing for?

Social prescribing is beneficial for all ages and backgrounds, with various social, emotional, and practical needs including but not limited to (14):

- individuals who are screened for unmet social needs and struggle to access appropriate services and supports in the community
- individuals living with mild or long-term mental health conditions
- individuals living with complex needs
- individuals living with multiple chronic health conditions
- individuals experiencing loneliness and who are socially isolated

These populations are also similarly very vulnerable to the health impacts of climate change, as the geographical, socioeconomic, biological, and demographic factors act as covariables in amplifying climate hazard risks to both physical and mental health (15). As a way of addressing social needs by creating connections between health and social care, social prescribing offers health and well-being support that is not limited to traditional medical care. By connecting people to community resources, social prescribing helps reduce isolation and enhance resilience.



DID YOU KNOW?

The mortality effects of loneliness are equivalent to smoking 15 cigarettes a day. Research has found links between climate anxiety and feelings of loneliness/social isolation (12, 13)





Environmental co-benefits

As a non-clinical model of care designed to improve health and well-being, social prescribing offers environmental co-benefits that can contribute to sustainable health systems. Increasingly being adopted by health sectors as an adjunct to traditional medical care, social prescribing attends to health and social needs. Participation in social prescribing programs has been shown to improve health and well-being, and improve community resilience (16). Improving community resilience is an important way to increase resilience to climate-related events.

In addition to the benefits to the patient and community, the potential to reduce the need for healthcare services also has an environmental co-benefit. Healthcare is responsible for significant greenhouse gas (GHG) emissions, with 4.6% of global emissions coming from health systems (17). Reducing the demand for health services is one of the principles of creating sustainable health systems (18).

A SUSTAINABLE APPROACH TO CARE

Social prescribing offers a sustainable approach to care, serving as an alternative or complement to resource- and carbon-intensive clinical and pharmacological treatments.

1. Supporting health
2. Managing health conditions
3. Building resilience
4. Promotion of environmental stewardship






SUPPORTING HEALTH


Most of our health is impacted by factors outside of the healthcare system (19) and drivers such as population growth, colonialism, and racism can increase vulnerability risk to health impacts of climate change (20). Social prescribing has the potential to strengthen social and cultural systems and structures, which can help support health promotion (21). Through a strengths-based approach of utilizing community assets, social prescribing contributes to the development of a healthier community, including its built environment through social prescriptions that include urban settings such as walking and biking groups (22).

By addressing the social, emotional, and psychological needs of patients through community resources and support, social prescribing may reduce the demand for healthcare.



Reduce healthcare visits

In a social prescribing pilot study in Ontario, 42% of primary healthcare providers reported reduced number of repeat visits by clients (23) .



Reduced emergency department use

In the UK, a scoping review found that participation in social prescribing may reduce emergency department visits (24).



Increased well-being

Social prescribing can increase participants' well-being and perceived levels of health and social connectedness and decrease anxiety (10).



Supporting health

Cultural engagement, which could be facilitated through a social prescription, was associated with decreased risk for developing disability in older adults (25).





MANAGING HEALTH CONDITIONS

Social prescribing is a supportive, alternative management tool that may offer a more environmentally sustainable alternative to clinical or pharmacological options, as clinically appropriate.

For example, social prescribing has been identified as a way to reduce the clinical and climate harms of overprescribing (26). Nature prescribing may be an achievable, low-cost, acceptable adjunct to usual care (including pharmaceuticals) for those experiencing loneliness and psychological distress (27).

Medications have a significant impact on the environment, contributing approximately 25% of Canada’s health system greenhouse gas emissions (28). Their manufacturing, use and improper disposal also causes damage to the environment (29). By exploring non-pharmacological interventions, patients can be offered additional options for their care with the co-benefit of reducing environmental impact.

CASE STUDY

The Rotherham Social Prescribing Pilot from the UK increased the capacity of GP practices to meet the non-clinical needs of their patients with long-term health conditions. In this pilot, 24 voluntary and community organizations received grants to deliver 31 separate social prescribing services. Patients were referred to these funded services, consisting of information and advice, community activity, physical activities, befriending and enabling. The impacts from the pilot program resulted in a 21% decrease of inpatient admissions, a 20% decrease in accident and emergency attendances, and a decreased £552,000 for NHS costs. Well-being benefits reported by patients included feeling less socially isolated as well as better mental and physical health (30).

RESOURCES

See CASCADES’ [Climate, Resilient, Low Carbon Sustainable Pharmacy Playbook](#) for more information about the environmental impact of medications.





BUILDING LOCAL SOCIAL AND ENVIRONMENTAL RESILIENCE

As noted in the Chief Public Health Officer of Canada’s 2023 Report on the State of Public Health in Canada (31), climate change-driven emergencies are increasing in Canada and are having an impact on physical and mental health, as well as community well-being. The report goes on to note that health promotion, as a function of public health, can work with communities to build effective responses to emergencies by advancing health equity, strengthening social supports and building trusted relationships that can foster social cohesion (31).

Social prescribing offers an approach that moves beyond individual behaviour to social, economic and environmental considerations in supporting health and well-being. As a means of engaging with others, participants in social prescribing programs can build a community where they can harness local resources and relationships in response to emergency events. Higher levels of pre-disaster social support have been linked to lower psychological and mental health impact after disasters (32).

Social prescribing emphasizes the value of community-based services, which have expanded to include support for education, outreach, nutrition, children’s health, health promotion activities, among many others, and which are delivered by civic sectors. The community health ecosystem is often “invisible” in the care pathway - social prescribing has the potential to be the mechanism that links formal health services to an inclusive, community-led, multisectoral, strengths-based approach that accounts for the most vulnerable to achieve “health for all” (33).

PROMOTION OF ENVIRONMENTAL STEWARDSHIP

Social prescribing often promotes activities that encourage environmental stewardship and support for sustainable practices. This might look like:

- Nature prescribing, which can take many forms and can sometimes result in the creation, restoration, protection, and maintenance of greenspaces with valuable community benefits and ecosystem functions (34). Examples include gardening, tree planting or conservation projects which can foster a deeper connection to the environment.
- Social prescribing that involves enabling environments, like community gardening, enables self-growth and improves patients’ sense of self (35). Developing skills in community gardening can raise awareness of sustainable practices that can be done at the household and community level. The spillover effects of sustainable household behaviour can lead to positive commitments to pro-environmental behaviour and attitudes (36).

RESOURCES

Chief Public Health Officer of Canada’s Report on the State of Public Health in Canada 2023. Creating the Conditions for Resilient Communities: A public Health Approach to Emergencies

- [Appendix A: Key health promotion tools for emergency management procedures](#), Chief Public Health Officer of Canada





OTHER BENEFITS

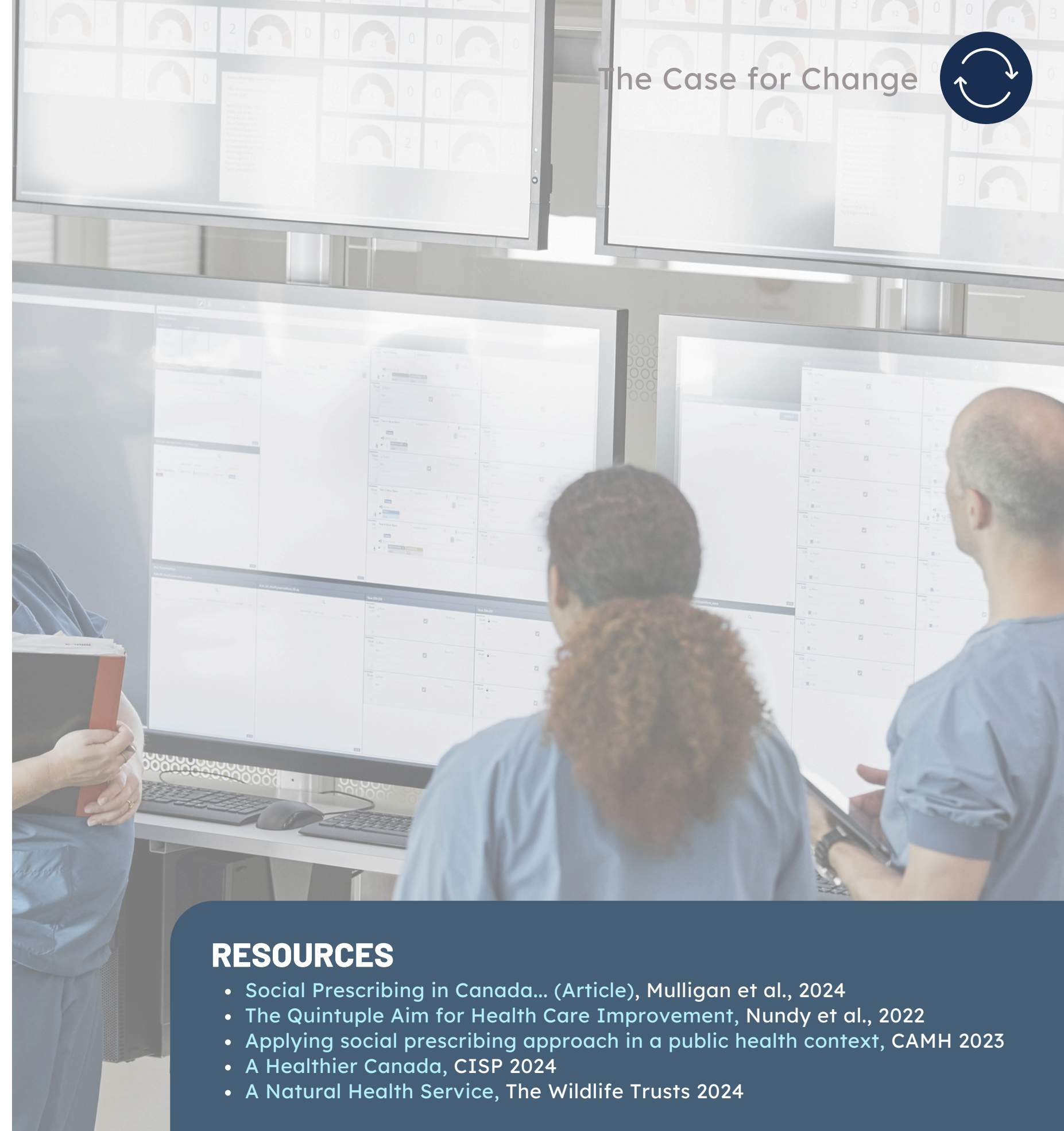
In addition to the potential for enhancing patient experience, promoting health equity, and improving health outcomes social prescribing may also benefit the healthcare workforce and reduce costs to the health system. This makes social prescribing aligned with the goals of the [Quintuple Aim](#) (11).

Healthcare workforce:

- There is growing evidence linking low resources for meeting patient social needs and clinician burnout, and that integrating medical and social services can protect against this by supporting clinicians and building a sense of purpose and efficacy (38).
- Capacity to address patient social needs has been associated with higher physician satisfaction and the perception of improved medical care (39).

Reducing costs to the system:

- A recent report on the potential economic and social impacts of social prescribing found that for every dollar invested in social prescribing programs there may be a return of \$4.43 to society through improved well-being and reduced costs to the health system (40)
- In the UK, health and well-being programs that connect people to nature were linked to reduced costs for the health system (41)



RESOURCES

- [Social Prescribing in Canada... \(Article\)](#), Mulligan et al., 2024
- [The Quintuple Aim for Health Care Improvement](#), Nundy et al., 2022
- [Applying social prescribing approach in a public health context](#), CAMH 2023
- [A Healthier Canada](#), CISP 2024
- [A Natural Health Service](#), The Wildlife Trusts 2024





WHAT

The Tools for Change



- 1 Use equity-focused health promotion approach by co-creating with patients
- 2 Enhance awareness of healthcare providers' ability to implement social prescribing
- 3 Understand and promote the role of the link worker
- 4 Partner with key players on programs with community and environmental benefits
- 5 Understand and promote the health benefits of nature exposure
- 6 Connect people to nature through social prescribing
- 7 Assess and publicize metrics on the environmental impact of social prescribing





Action 1: Use equity-focused health promotion approaches by co-creating with patients

Equity focused social prescribing initiatives are co-created with patients to ensure they can access activities and services in their communities that align with, and meet, their specific needs. Incorporating an equity-based lens in social prescribing is essential for improving the patient's experience, increasing participation, and building community resilience.

USE PATIENT ASSESSMENT AND REFERRAL PROTOCOLS THAT ARE GUIDED BY HEALTH EQUITY

Social needs screening involves healthcare professionals asking patients about social issues including their employment, finances, housing, education, and social isolation (42). Research in Canada has found that this type of data collection is feasible in primary care settings and that it can be used to inform the development of programs aimed at addressing health inequities (43) and connecting people to relevant support services (44). Screening tools should be culturally and age-appropriate such as the [Wheel of Life](#) (Black-focused Social Prescribing) and [Healthy Aging Asset Index](#) (Healthy Aging CORE Alberta).

Although primary care is often the first point of contact for people seeking help with their problems, access is not the same for everyone. For example, young people, migrants, and refugees may have trouble navigating the system, and exploring other routes to social prescribing (through community-based services) is also important (45).

CASE STUDY

St. Michael's Hospital Family Health Team (Ontario) formed the Social Determinants of Health (SDoH) Committee to address social risks to health and social inequities into their clinical programs, education, research and quality improvement. Their equity-based approach involves physicians, nurse practitioners, social workers, patient advisors and other members of the healthcare team. The team has incorporated assessment tools, including the Ontario Poverty Tool, and their own adapted questionnaires that routinely collect sociodemographic data on patients that are fed directly into the patient's electronic medical record.





IMPROVEMENT OF PATIENT EXPERIENCE THROUGH AN EQUITY-BASED LENS

When social prescribing programs are co-designed and tailored to the individual, they address the unique needs and circumstances of each person. This approach aligns with the principles of the self-determination theory (SDT), which emphasizes the importance of fulfilling basic psychological needs: autonomy, competence, and relatedness, to enhance motivation and well-being (46).

Autonomy

Tailoring social prescriptions to the individual’s needs, preferences and cultural context promotes autonomy. When patients feel that they have a choice and control of their care, they are more likely to be motivated and engaged in the prescribed activities (46).

Competence

By providing support that matches the individual’s abilities and local resources, social prescribing ensures that patients feel competent in engaging with the activities. Programs that are accessible and appropriate for the individual’s skills and circumstances help build confidence, which is essential for sustained participation (46).

Relatedness

Considering the social and cultural context of the patient, social prescribing can connect individuals to community resources and activities that resonate with their values and experiences. This connection to the community fosters a sense of belonging and relatedness (46).

ASSESSMENT/REFERRAL TOOLS USED ACROSS CANADA, ADAPTABLE TO THE LOCAL CONTEXT

- Wellbeing Prescription, Population Health Series
- Social Prescribing Program Referral Form, Fraser Health Authority
- Prescribing Wellness for Older Adults Referral Form, Healthy Aging CORE
- Social Prescribing Referral Form, Canadian Alliance for Social Connection and Health
- WHO Toolkit on how to implement social prescribing, World Health Organization
- Conceptualizing and Implementing Social Prescribing Programs, Canadian Alliance for Social Connection and Health
- United Way BC Connector Training, Healthy Aging Core



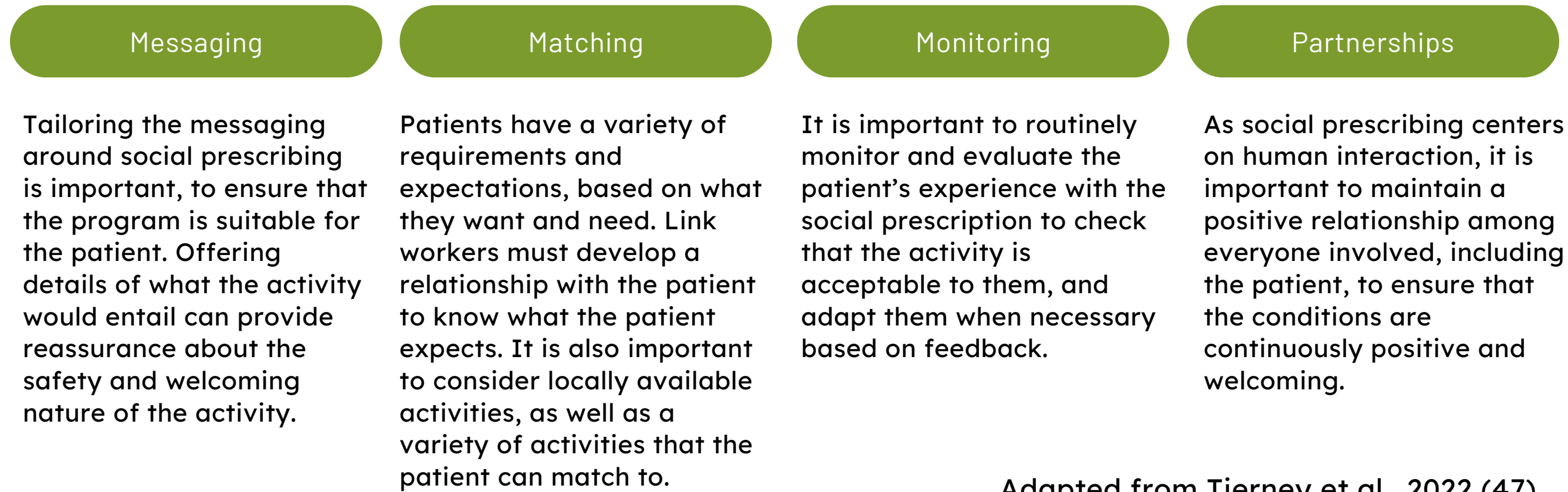


INCORPORATE CULTURALLY-INFORMED AND SAFE PRACTICES TO TAILOR SOCIAL PRESCRIBING OFFERS



To be effective, social prescribing needs to center around autonomy, recognizing that the “one-size-fits-all” approach may not be appropriate as people have different experiences and expectations. “Tailoring” involves delivering support or treatment in line with the patient’s needs and preferences (21). Tailoring social prescribing programs to incorporate culturally-informed and safe practices is important to meet the needs of the patient, while accommodating to social and environmental circumstances (21).

Tailored social prescribing programs that incorporate culturally-informed and safe practices can connect people to the vibrancy and strengths of their own communities. There is a necessity for tailored interventions that address ethnic and cultural populations to develop an ecosystem of care. When co-creating the social prescription with the patient, components for tailoring include (47):



Adapted from Tierney et al., 2022 (47)

CASE STUDY

The Alliance for Healthier Communities established a Black-focused social prescribing project in 2018 (48). Community Health Centres with experience supporting Black clients were selected to develop a social prescribing model grounded in Afrocentric Values and principles in Toronto and Ottawa, Ontario. Examples of social prescriptions included: attending the play “Da Kink in My Hair” to foster encourage social connection - this also included a meal at a Black-owned restaurant to share Black stories; and the addition of Kemetiic Yoga Classes to social prescribing programs for Black older adults to encourage mind-body-spirit connection (48). In recognition of its impact, this project was awarded the Social Prescribing Innovation Award 2024 by the Canadian Institute for Social Prescribing.





MEETING SPECIFIC NEEDS



Social prescriptions provide an opportunity to assist individuals facing specific challenges, for example, by offering food prescriptions to address food insecurity or providing cooling/warming devices to meet essential needs.

PRESCRIBING COOLING/WARMING DEVICES

Warm Home Prescription is an innovative SP initiative that is being piloted across England and Scotland for people who struggle to afford energy and have severe health conditions that worsen from the cold (49). An energy company partnered up with the NHS system in 2022-2023 and supported over 823 homes by offering a credit to their energy account and upgrading home appliances where possible. Benefits included:

- 79% of recipients reporting a positive impact on their physical health; and 70% on their mental health
- 94% of healthcare professionals and 77% of energy advisors reporting satisfaction in the social prescribing process
- Reducing cost pressures on the NHS and freeing up beds in the hospitals
- Proactively helping vulnerable people through the winter

In Canada, people who receive Ontario Works Assistance or Ontario Disability Support Program can apply for cooling devices (50). A prescription from a physician or nurse practitioner with a diagnosis is required. As the impacts of extreme heat events disproportionately affect certain vulnerable populations, the cooling device prescription may be part of the treatment plan. The identifier (prescriber) needs to indicate that the cooling device is required to control the room temperature/humidity based on risk to life and hospitalization.

A template letter to support applications for cooling devices was developed by a group of clinicians working to educate Assertive Community Treatment teams on the health harms of extreme heat for patients with schizophrenia. [Click here to see the letter.](#)

Credit: Samantha Green, Daniel Rosenbaum, Michaela Beder, Sarah Levitt, Talveer Mandur, and Grace Kuang (51)





Action 2: Enhance awareness of healthcare providers' ability to implement social prescribing



Although identifiers (prescribers) can be from outside of primary care and clinical settings, this action is focused on those who provide community-based primary care, as this is often the start of the social prescribing pathway (14). Access to care can differ, and engaging a broader group of healthcare providers in social prescribing increases entry points for patients

PROVIDER	EXAMPLES IN PRACTICE	RESOURCES
Family Doctors	Family physicians are well positioned to introduce social prescriptions because of their specialist role in providing person-centred primary care (52). There is work being done on collecting data on the social determinants of health in primary care settings in Canada to better tailor care to a patient's social context, and to understand these data as risk factors affecting health (53).	Review the one-pagers for family physicians in Alberta on how you can get started on social prescribing.
Nurse Practitioners	As providers of comprehensive care that includes prevention, nurse practitioners (NPs) are well placed to act as social prescribing identifiers (prescribers). One example is the suitability of the NP role to counselling and prescribing time outdoors as a means to enhance health and well-being (54). Lakeshore Community Nurse Practitioner-Led Clinic (Ontario) provides social prescribing .	This video shows social prescribing in action at the Lakeshore Community Nurse Practitioner-Led Clinic

RESOURCE: SOCIAL PRESCRIBING: A RESOURCE FOR HEALTH PROFESSIONALS

Developed by the Centre for Effective Practice, Canadian Institute for Social Prescribing, Alliance for Healthier Communities & St. Michael's Unity Health Toronto to support health professionals working in primary care this resource includes step-by-step support on how to screen for social needs, talking points to set the stage for a social prescription, billing code directives, and tips for follow-up.





PROVIDER	EXAMPLES IN PRACTICE	RESOURCES
<p>Community Pharmacists</p>	<p>Pharmacies are recognized as a suitable setting for social prescribing (55). The Royal Pharmaceutical Society released a position statement on “Pharmacists and Social Prescribing” with recommendations including:</p> <ul style="list-style-type: none"> • All pharmacists should be made aware of social prescribing and the opportunities social prescribing presents to support the health and well-being of the people they see and interact with. • All pharmacists should have access to training on social prescribing to ensure that the referrals they make are appropriate and ultimately lead to benefits for the person they are referring to. • Pharmacists should be encouraged and supported to proactively reach out to their local social prescribing service to build a relationship and gain an understanding of who is eligible for referral 	<p>Case studies have been developed to support community pharmacists in learning about what type of patients benefit from social prescribing, how to identify local social prescribing interventions and how one might practice social prescribing screening and referrals in practice</p> <p>Social prescribing in pharmacies: What is it, does it work and what does it mean for Canadian pharmacies?</p>
<p>Allied health professionals</p>	<p>Allied health professionals deliver, support, or inform direct patient care and includes occupational therapists, physiotherapists, dietitians, psychologists, music therapists, paramedics, speech and language therapists, and other roles (56). They bring a wealth of expertise in understanding the broader determinants of health that extend beyond traditional medical care (57).</p> <p>The Royal College of Occupational Therapists has identified roles for OTs in social prescribing (58).</p>	<p>Driving Forward Social Prescribing: A Framework for Allied Health Professionals (UK)</p>





Action 3: Understand and promote the role of the link worker



Link Workers, also known as community connectors, navigators, coordinators, or other titles, are individuals who help bridge health and social care (11). Link workers and other community connectors (either formal or informal) have an important role to play in the social prescribing pathway.

Link workers can address the limited capacity of healthcare providers

Healthcare providers are well-positioned to identify patient needs but may have limited capacity to follow up on these. Understanding the functions of link workers and how they can support social prescribing can address limited capacity of healthcare providers (59)

Link workers can provide additional support in the referral pathway

- Link workers support conversations about individual health and social care needs and the setting of personalized and achievable goals.
- Social prescribing is a network of relationships, and link workers help to develop and maintain those relationships that allow social prescribing to function (60).

Link workers can support patients as they participate in programs

Social prescribing programs that offer light support through “signposting” patients to specific programmes often do not follow-up with the patient (61) . “Follow up” is one of the stages of the referral pathway (11) and link workers can perform this function to assess fit and reassess goals.

Figure x: Link worker competency domains (Canadian Institute for Social Prescribing)

Individual Support	Community Engagement	Program Administration
<ul style="list-style-type: none"> • Effective communication • Cultural safety and competence • Person-centred care planning • Behaviour change support 	<ul style="list-style-type: none"> • Partnership building • Local resource knowledge • Community Development 	<ul style="list-style-type: none"> • Population health monitoring • Data collection and monitoring • Quality and safety compliance

LINK WORKER TRAINING PROGRAMS

- [United Way British Columbia Link Worker Training](#) (Enrollment based)
- [Healthy Ageing Alberta Link Worker Training](#) (Contact on website)

RESOURCES

- [CISP Link Worker Competency Framework \(Canada\)](#)
- [LW Competency Framework \(UK\)](#)
- [Social Prescribing Link Worker Induction Guide \(UK\)](#)
- [Link Worker Professional Standards \(UK\)](#)





Action 4: Partner with key players on programs with community and environmental benefits

FORM COLLABORATIVE PARTNERSHIPS WITH EXISTING PARTNERS AND ASSETS

Social prescribing programs can develop new and effective partnerships with existing assets in the community. Programs may have a particular emphasis on the environment; however, non-ecologically focused programs still provide sustainability opportunities through providing non-clinical services for preventing or managing health concerns.

Asset-Based Community Development (ABCD) is a strengths-based approach that recognizes the importance of communities and what is important to the individual (i.e. faith, lifestyle, family) to promote well-being and for developing resilience (62). Integrating ABCD approaches are at the heart of social prescribing models, building on what's already strong locally.

CASE STUDY

Misconceptions of social prescribing include the belief that it requires the development of new programs. In reality, social prescribing is designed to complement rather than replace existing core service delivery models, often utilizing resources and services that are already available. The Windsor Family Health Team focuses on building rapport with community services emphasizing referrals to agencies that already offer services for community support (63). To enhance access to services and strengthen community assets, they work closely with the 211 Ontario System, a free and confidential service that easily connects people to the critical social and community support they need. 211 provides a comprehensive and integrated provincial resources database that contains information about programs and the agencies delivering them, including eligibility criteria, hours of operation, transportation and accessibility, and intake processes.







RESOURCES

- A Guide to Community Asset Mapping, Falls Brook Center
- Asset Based Community Development At a Glance (Tool), Tamarack Institute
- The Ultimate Guide to Successful Community Development in Canada, The Sector
- Asset Based Community Development, Nurture Development





EXAMPLES OF SOCIAL PRESCRIPTIONS IN CANADIAN COMMUNITIES BUILT ON LOCAL COLLABORATIVE PARTNERSHIP

PROGRAM	DESCRIPTION	RESOURCES
 <p>RxTGA (Prescription to get Active)</p>	<p>The RxTGA program is based in Alberta, and scaled across Canada. After receiving a written prescription to the program, the patients are directed to an instructional resource website that offers online exercise videos and guides on how to get active in their local community. The program partners with recreation member facilities who offer free membership trials to the patient. The program also offers free support through a fitness app.</p>	<p>For prescribers For programs</p>
 <p>Seniors Community Services Partnership (SCSP)</p>	<p>SCSP is a partnership between six service organizations in Lethbridge, Alberta. The Seniors System Navigators Team coordinates support to seniors to navigate and access community, health and social resources.</p>	<p>Referral Form</p>
 <p>Links2 Wellbeing : Social Prescribing for Older Adults</p>	<p>Links2Wellbeing, a partnership between Older Adults Centres' Association of Ontario and the Alliance for Healthier Communities, enables healthcare providers in Ontario to link socially isolated older adults with community programs offered at Seniors Active Learning Centres and Community Health Centres.</p>	<p>Impact stories from providers, patients, link workers and program staff</p>
 <p>Fresh Food Rx</p>	<p>A 52-week program in Guelph, Ontario in which eligible patients were prescribed healthy foods that are subsidized or no-cost. This program was conducted in partnership with The Seed, a food access program that is embedded with the Guelph Community Health Centre. (Brubacher et al 2024)</p>	<p>Implementation Case Study</p>





SPOTLIGHT ON CULTURE AND ARTS

One example of using community assets is to leverage the culture and arts sector to design inclusive, environmentally-informed social prescribing programs. Culture and arts remain an untapped and underutilized tool to support learning and engagement about climate change (64). Community assets in local areas often include the cultural sector to support building community and connections through dance, music, theatre, heritage engagement and art. Community centres, libraries and public spaces offer place-based social prescriptions that are beneficial for engaging with patients, as well as utilizing cultural settings appropriately. In addition to being the site of programming, spaces like libraries are increasingly trying to meet the needs of their patrons by addressing the social determinants of health (65) and can act as resources about climate change (66).

Additionally, art can be integrated in social prescribing activities to help educate about climate change. People can be engaged with climate change in art, with art, and through art (64). Creative engagement with nature helps participants access and articulate sensory experiences of nature which may be difficult to express, and creation can support well-being, self-management, empowerment and coping mechanisms (64). Social prescribing that involves the culture sector can immerse participants in their surroundings, providing relief from thinking about their problems (21)

Community programs, conservation, cultural, and natural heritage sites often operate within constrained financial environments and are unlikely to have the resources to design evidence-based interventions involved in social prescribing. With similar missions to strengthen communities and support well-being, commitments to social and nature prescribing have created considerable demand to work across public health, health, conservation, culture, and other sectors.



RESOURCES

MBAM-MFDC MUSEUM PRESCRIPTION PROGRAM

Members of Medicines Francophones du Canada (MFdC) can write museum prescriptions to the Musee des Beaux-Arts Montreal (MBAM). A virtual program was started in 2021.

- Prescriptions Museales MBAM-MFDC (available in French)
- Prescription Meuseale en ligne (available in French)





FOSTER INDIVIDUAL AND COMMUNITY RESILIENCE BY PROMOTING SOCIAL CONNECTION

Many social prescribing programs aim to increase the connections between people, encourage community engagement, and promote supportive environments. This provides benefits at different levels:

INDIVIDUAL

At the individual level, social prescribing can support individuals to take greater control of their own health, building individual resilience through increasing a sense of acceptance, belonging or identity in consideration to connectedness (16).

COMMUNITY

Community resilience refers to the ability of a community to transform the environment through deliberate, collective action, and requires community members to effectively manage and learn from the adversity of natural disasters (67). Community resilience begins by improving the connectedness and cohesion of individuals (68). Communities that are more connected, are more likely to be economically productive and better able to help each other in times of need (16), which can include climate disasters. A survey of older adults found that 70% of respondents felt that social prescribing would “help connect people and communities” (69).

HEALTH SYSTEM

At the health system level, social prescribing is a more sustainable model of care that contributes to population resilience. This can allow healthcare resources to be redirected to areas of critical need, reinforcing the system’s capacity to respond to new challenges (70). A systematic review of outcomes associated with social prescribing participation identified general trends in reduction in family practice visits, inpatient admissions, outpatient appointments, hospital discharge, mental health services discharge and mental health service visits (16).



RESOURCES

- The Canadian Alliance for Social Connection and Health has developed Social Connection Guidelines
- [Community Guidelines](#), Canadian Alliance for Social Connection and Health (Canada)





PROVIDE OPPORTUNITIES FOR COLLABORATIVE COMMUNITY ENGAGEMENT AND ADVOCACY

By encouraging community connections and advocacy, social prescribing programs can be co-designed to empower communities and enhance their capacity to face various challenges, including those related to climate change.

Co-design is an evolving concept that can mean different things to different key players (71). Co-design involves more than consulting key partners about service design. It is a collaborative process of engagement and decision-making that empowers each person at the table to share their experiences and perceptions (71).

Collaborative community engagement and advocacy can accelerate progress toward climate resilience, providing hope for a shared positive outcome. Co-design can help planners and policymakers to build healthier cities and infrastructure, which not only addresses ecological priorities but also incorporates patient demands and needs (72). Co-designing with community members also fosters cross-sector collaborations which can address the structural inequities that make climate change devastating.

Benefits of community engagement

- Involving community members in the co-creation of social prescribing programs can build and reinforce social networks that offer critical support during climate-related crises.
- Partnering with local organizations and experts enables communities to develop the skills and knowledge needed for effective adaptation and resilience. This could include initiatives that promote sustainable practices, such as local food production, or conservation activities.
- Collaboratively engaging in a collective voice, social prescribing programs can serve as a platform for influencing public policy. Encouraging the adoption of practices that address health inequities while bolstering climate resilience can amplify awareness and mobilize action.



CASE STUDY

In the City of Toronto (Ontario), a grassroots, volunteer-driven project known as “Community Resilience to Extreme Weather” (CREW) was created to explore ways of communicating needs to the increasing risks and hazards of extreme weather. CREW uses a “neighbours helping neighbours” approach with multigenerational, multicultural volunteers that work to build supportive social networks to prepare their neighbours for extreme weather emergencies. One initiative includes a “heatwave protocol” where they train residents in a community to check-in on vulnerable residents and offer support. [Learn more about this project.](#)

RESOURCES

Tools on engagement

- [Understanding Co-Design, Alberta Health Services](#)
- [International Association for Public Participation](#)





Action 5: Understand and promote the health benefits of nature exposure

Nature is the physical features and non-human processes that we see in the environment (73). This includes plants, animals, and landscapes.

NATURE AS A THERAPEUTIC LANDSCAPE

There are many attributes about nature that contribute to a healing sense of place. Coined as “therapeutic landscapes”, they have historically been understood as spaces “where the physical and built environments, social conditions and human perceptions combine to produce an atmosphere which is conducive to healing” (74). The physical health-promoting qualities of a given space are subjective to the individual’s experience, offering personal psychological and collective cultural associations within the therapeutic physical environment.

The exposure to natural environments can lead to restorative and regenerative performances of the body (74). The interrelationships between land, culture, and health make an environment therapeutic. Examples include:

- pilgrimage sites
- healing baths (onsens, spas)
- sweat baths
- restorative gardens

EQUITY CONSIDERATIONS

Access (both physical and social) to green space differs significantly based on factors such as race, gender, socioeconomic status, geographical location, and cultural background (75). The assumption that everyone experiences nature in the same way, and with the same benefits, overlooks these disparities. Nature prescribing is an opportunity to ensure that nature is accessible, welcoming and beneficial for all if it is focused on equity, designed with an understanding of who has access to nature, feels safe and included, and who can use these spaces in a way that aligns with their cultural and personal needs.



RESOURCES

For information on urban parks, [Park People](#), a national, bilingual organization dedicated to championing city parks in Canada has resources on the benefits of public green space.

The [2024 Canadian City Parks Report](#) discusses the opportunity for parks to support mental and physical health, as well as the need to build partnerships to create programs that support these goals.

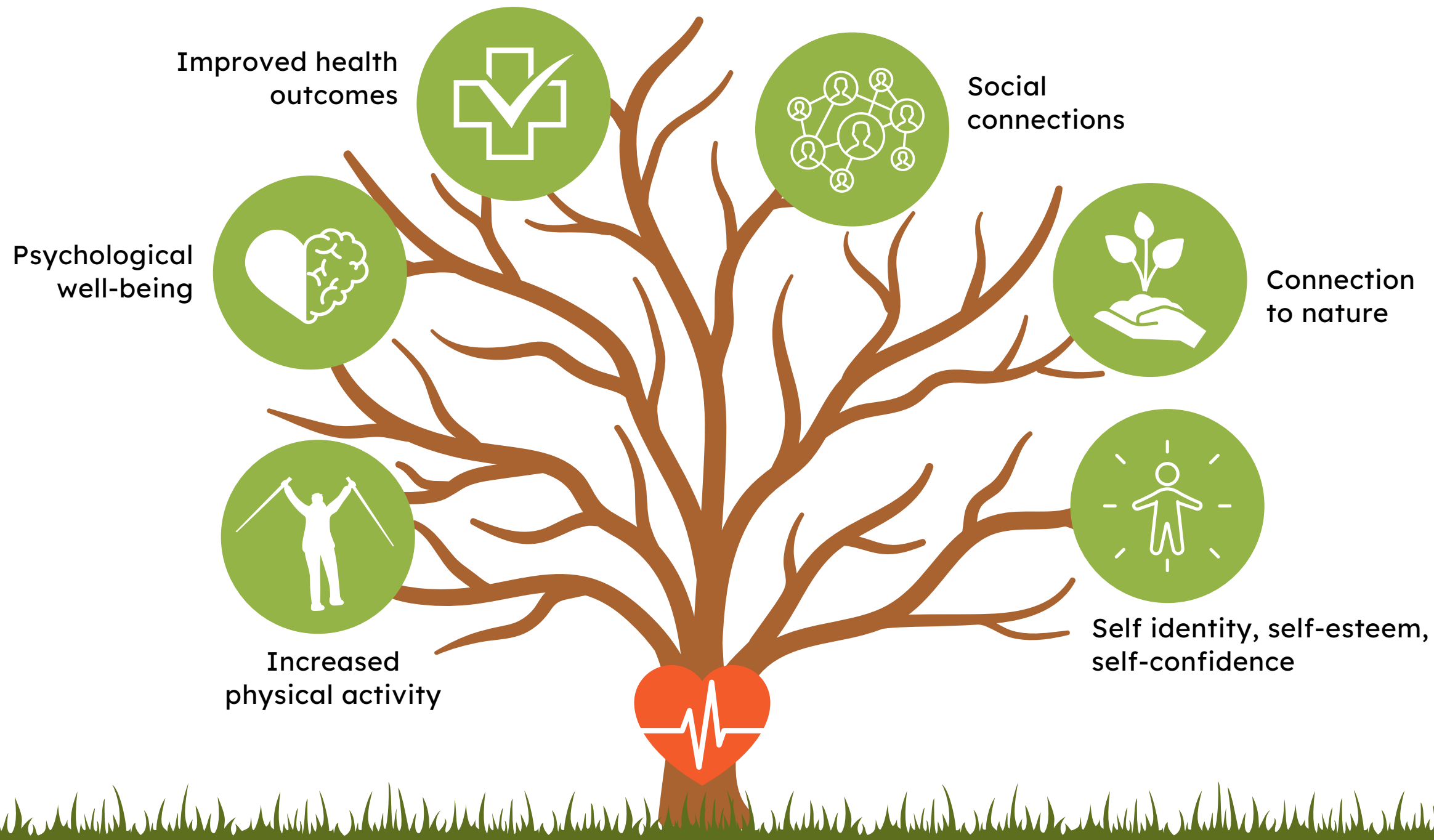
- [2024 Report](#), Park People



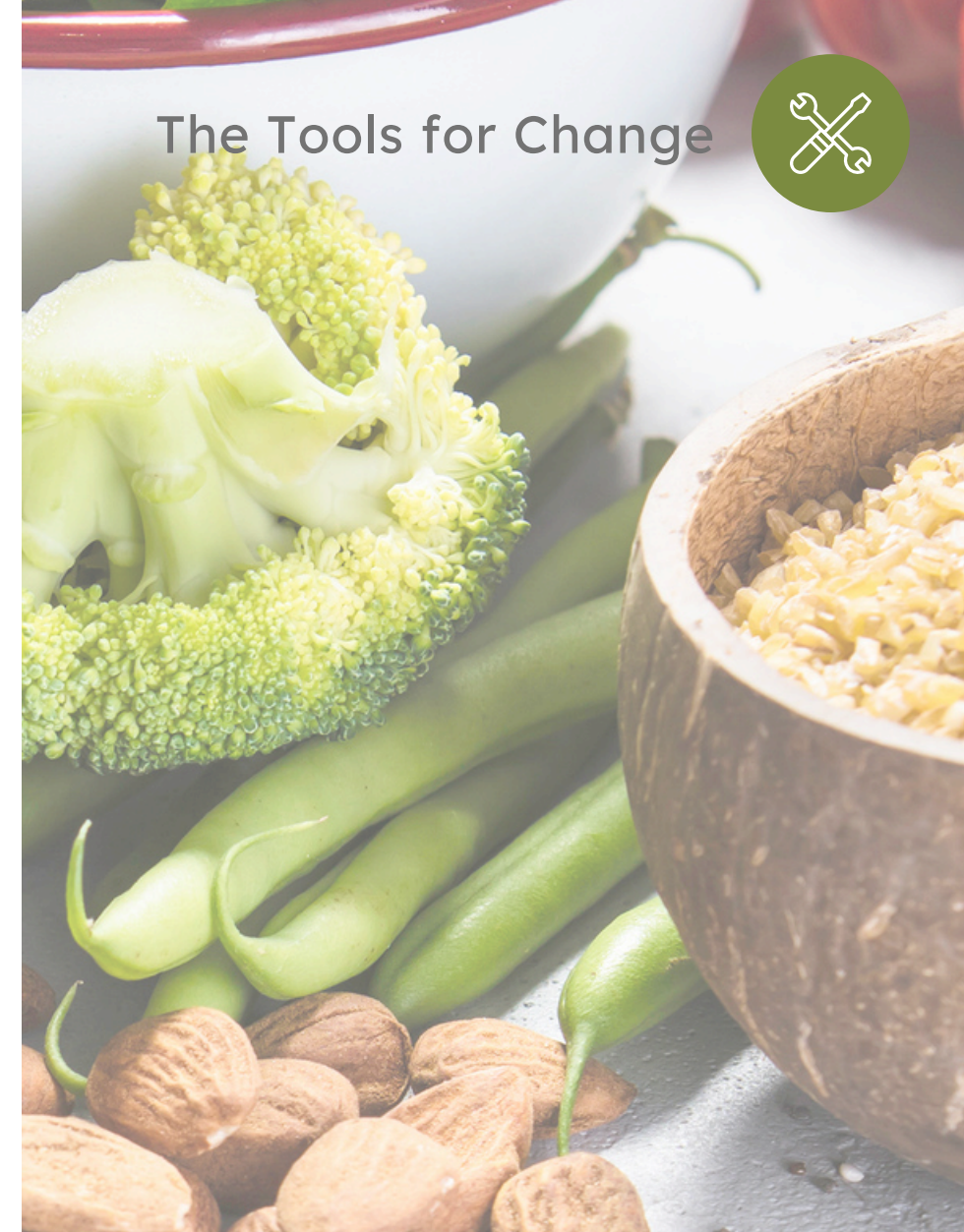


MENTAL & PHYSICAL HEALTH BENEFITS OF NATURE

Exposure to, and engagement with, nature can affect health both physiologically and psychologically (76).



The Tools for Change



RESOURCES

This webinar was hosted by St. Michael's Family Health Team with speakers from the Canadian Association of Physicians for the Environment (CAPE) and Sick Kids about the benefits of time spent in nature.



VIDEO: Benefits of Time spent in Nature
Unity Health Toronto (Canada)





BENEFITS OF NATURE AND THE HEALTHCARE EXPERIENCE OF PATIENTS AND FAMILIES

The benefits of connecting with nature can also positively impact the healthcare experience of patients and families. Healthcare facilities that incorporate elements of nature in the built environment through the concept of the “Green Hospital” encompass a green/eco-friendly management of the life cycle of the building (77). Hospital infrastructure is shifting towards green buildings, including incorporating natural lighting and green roofs/gardens into its infrastructure (77). These spaces can be identified as therapeutic environments, and prescribed as part of the patient’s care plan to promote healing and well being , while also contributing to biodiversity conservation within the urban setting.

CHILDREN’S ENVIRONMENTAL HEALTH CLINIC

In the London Health Sciences Centre (Ontario), the Children’s Environmental Health Clinic developed a “Nature for Healing Program” to encourage nature prescribing of indoor and outdoor naturalized areas at the Children’s Hospital (78). This has included:

- Exposure to plants (hospital garden)
- Adding plants in hospital rooms and/or waiting rooms
- Encouraging activities that connect children to nature (indoors and outdoors) while receiving care

Physicians and Nurse Practitioners can prescribe nature to in- and out-patients.



RESOURCES

These are resources to share with family and caregivers on how to encourage outdoor play in nature:

- Nature Inspiration Guide, Fairplay
- Parks Canada Xplorers Program, Parks Canada





INDIGENOUS WAYS OF KNOWING: LAND-BASED HEALING

Indigenous Peoples within Canada are vital stewards of the environment, with traditions and belief systems that regard nature with deep respect. Their senses of place and belonging match their ways of life aligned with nature conservation, and connection to nature. Situating social and nature prescribing programs in Indigenous communities must consider to account for the determinants of Indigenous Peoples' Health, languages and align acceptable types of prescriptions for Indigenous communities, including best practices for finding consensus on how to safely introduce this type of practice (79).

Land-based healing is a widely practiced and respected approach in Indigenous communities, combining Indigenous knowledge and cultural traditions to promote healing and wellness. Evidence based research demonstrate that culturally-based and trauma informed lens initiatives provide effective evidence-based therapies for mental health, addiction treatment, and trauma recovery by reconnecting Indigenous peoples with their ancestral lands, identities, and traditions (79).

These land-based healing programs offer important historical context and underscore the need for Social Prescribing initiatives to engage and make alignments to Indigenous medicine and wellness approaches as they offer pathways to recovery and cultural preservation through connection to the land and traditions.

CASE STUDY: THE CHIGAMIK COMMUNITY HEALTH CENTRE (ONTARIO)

Through a partnership with the Alliance for Healthier Communities and engagement with Lakehead University, the Chigamik Community Health Centre implemented a social prescribing program, serving their unique blended community of Indigenous, Francophone, and community members of North Simcoe Muskoka, Ontario (80). The focus on nature prescribing has been the facilitation of access to locally identified areas of nature through reduction in membership costs and transportation. The primary outcome measures for the initiative was to improve mental health through social prescribing. To ensure culturally inclusive, responsive, and appropriate nature prescribing in this community, the Chigamik CHC aims to adopt and implement a Two-Eyed Seeing approach to build on the strengths and perspectives of Indigenous and Western World views.



RESOURCES

Below include resources on different approaches that can be integrated in social and nature prescribing initiatives:

- [Understanding Indigenous Health Inequalities through a Social Determinants Model](#), National Collaborating Centre for Indigenous Health
- [Seven Generations of Continuum Care](#), Assembly of First Nations
- [Alianait Inuit Mental Wellness Action Plan](#), Inuit Tapirit Kanatami
- [Métis Nation Mental Wellness](#), Metis Nation





Action 6: Connect people to nature through social prescribing

Numerous mechanisms have been proposed for how to connect people to nature, as nature-based health interventions. There are many activities that are suitable for a diverse range of patients and their needs, that may constitute a nature prescription. The foundations often require the interactions of three main phenomena: a natural environment, social context, and meaningful activity (81).

Natural surroundings  Social context  Meaningful activities

NATURE PRESCRIBING - PaRx

PaRx is Canada's national, evidence-based nature prescription program, driven by health-care professionals who want to improve their patients' health by connecting them to nature (83). Each prescriber registered with PaRx receives a nature prescription file customized with a unique provider code and instructions for how to prescribe and log nature prescriptions. PaRx recommends that clinicians prescribe a minimum of 20 minutes of nature exposure at a time, up to two hours a week. The prescription program also advises that exposure to nature could be sedentary, such as sitting on a park bench, or active, such as hiking in the woods. The program has received wide recognition and endorsement as an effective way to inspire protection and restoration of nature as the foundation to human health by the World Health Organization and the International Union for Conservation of Nature (82).

RESOURCES

- Nature on Prescription Handbook, European Centre for Environment & Human Health)
- Good practice in Social Prescribing for Mental Health: The role of nature-based interventions, Natural England
- The Wildlife Trusts (UK)
- The Big Green Book (UK)





TYPES OF NATURE PRESCRIBING

Like other types of social prescribing, nature prescribing should be tailored to the needs and abilities of participants. Activities that make up nature prescriptions can include active or passive connections with nature (73). Nature prescribing is a type of nature-based health intervention that includes programs or strategies that engage people with nature to improve their health and well-being (73). These activities may include active connection with nature (through activities such as walking or gardening), or passive connections (spending leisure time outdoors).

Passive Nature Prescribing *Being in Nature*



- Spending time outdoors
- Forest bathing
- Access passes to green spaces (e.g. park passes, museum passes)

Active Nature Prescribing *Doing in Nature*



- Gardening
- Biodiversity conservation
- Care farming
- Exercise in nature
- Wilderness arts and crafts



RESOURCES

Canoo is a mobile app that provides new Canadian citizens with free admission to over 1400 museums, science centres, art galleries, parks, and historic sites across Canada.

- [Canoo](#), Institute for Canadian Citizenship





NATURE PRESCRIBING'S ENVIRONMENTAL CO-BENEFITS

Nature social prescribing programs should explore the opportunity to have co-benefits for the health of individuals, communities and the environment (84). Nature social prescribing can have environmental co-benefits, which occur in different ways:

Engagement with nature

- Nature prescribing could include activities focused on biodiversity conservation, allowing for improvements to participant health and the enhancement and maintenance of green spaces (85)
- Participating in nature prescribing programs may have additional benefits of increasing pro-ecological behaviours and environmental stewardship (85)

THE NEED FOR GREENSPACE

Nature prescriptions need the outdoor sector (which includes education, recreation and commercial tourism) as well as healthcare to be successful. The presence of greenspace in communities is a significant enabling factor for nature prescribing (86). Recommendations to encourage pro-nature conservation behaviours and nature connectedness include using policy and planning to create opportunities for simple engagement with nature (86), which is facilitated through the creation and maintenance of natural spaces.

CONSIDERATIONS FOR SUCCESSFUL NATURE PRESCRIBING PROGRAMS

[A Handbook for Nature on Prescription to Promote Mental Health](#) (University of Exeter) has identified the following advice for sustaining impact (87):

- Site Considerations: Location of programs and factors like access by public transport can have an impact on whether a site continues to be used. Alternative locations where participants can continue to practice their skills can be suggested.
- Teaching “portable skills”: The skills taught through the Nature on Prescription programs should be applicable to daily life to support uptake and adherence.
- Facilitating social connection in the post-intervention period: Opportunities include signposting to relevant volunteer groups, volunteering with the original program or setting up an ongoing group for people who have finished the program.





Action 7: Assess and publicize metrics on the environmental impact of social prescribing

Social prescribing programs and pilots have demonstrated reductions in patient hospital visits and drug use (88). In a study of the effectiveness of a social prescribing service, qualitative data from patients was collected when they entered the service and again when they exited (24). There were improvements in participants' well-being and perceived levels of health, but no conclusive data on metrics that would lead to reductions in environmental impact, like future access to primary care. If programs can link measured improvements to reduced medication use or admission rates, there would be a clear environmental benefit.

COLLECTING METRICS

RECETAS (Re-imagining Environments for Connection and Engagement: Testing Actions for Social Prescribing in Natural Spaces) is using three randomized control trials (RCT) to test and evaluate nature-based social prescribing interventions. Outcomes will be assessed using validated tools and include environmental and health behaviours (89).

METRICS OF INTEREST

As the potential carbon savings associated with social prescribing remain unclear, programs able to track metrics with implications for environmental sustainability have much to contribute. Metrics such as hospital visits, medication prescriptions, or usage of other healthcare resources by patients enrolled in social prescribing programs at baseline and at various evaluation intervals can be multiplied by appropriate emission factors to allow for an accounting of any carbon savings.



RESOURCES

CASCADES Metrics for Change: Towards Sustainable Health Systems course is designed to provide members of the healthcare community with a better understanding of how we can mobilize metrics to assess and mitigate the environmental impacts of the health sector at the micro, meso, and macro levels.





CAVEATS

It can be challenging for social prescribing programs to collect data on environmental metrics as such programs are often under-resourced; moreover, the small size of many programs can also limit the generalizability of data. There are a myriad of issues that affect the availability, quantity, and quality of data available, including the capacity of link workers and social prescribing programs to collect data from participants, particularly at the individual level; as well as the capability within the whole system to systematically link and analyze the data in a systematic way (90). See the resource section for guidance.

SUPPORTING GOALS

Incorporating the monitoring and evaluation of social prescribing programs can be embedded into quality improvement. It is important to develop a theory of change, to support the monitoring and evaluation framework. However, where possible, data collection that will facilitate carbon accounting should be prioritized. A better grasp of social prescribing's potential to diminish the climate impacts of the health sector, coupled with the growing evidence-base of its benefits for patient health, can bolster efforts to advocate for the increased use of social prescribing in communities globally. Collecting metrics also supports evidence collection efforts related to other health-promoting agendas and targets, including the [Ottawa Charter](#), and the [Quintuple Aim](#) (11). This data is important to support decision-making and priority setting.

METRICS IN ACTION

[Connect & Prepare](#) is a project with Building Resilient Neighbourhoods, an initiative comprised of municipalities, emergency management agencies, and community organizations, as well as participating housing operators and residents. The program aims to strengthen emergency preparedness, intergenerational neighbourly connections, and community resilience in multi-unit housing. An evaluation of the scaling pilot found residents reported increased connection to neighbours, preparedness to take action together during an emergency, and the building of long-term resilience.

RESOURCES

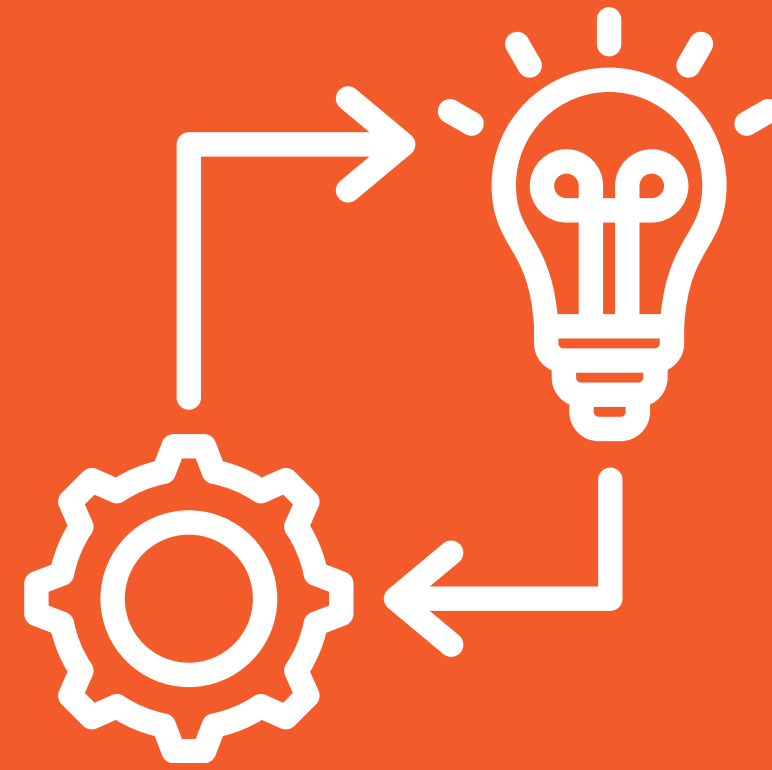
Designed to help programs apply a health equity lens to program planning, Fraser Health Authority developed the Community Planning Tool. The tool includes steps for assessing progress and communicating results.

- [Community Planning Tool: Applying a Health Equity Lens to Program Planning](#), Fraser Health Authority

As part of their Community Implementation Toolkit, Healthy Aging Alberta has developed a guide to evaluate program impact. It is intended for program staff and is meant to support consistent collection of data. The guide includes core measures on hospitalization and emergency department use.

- [Client-Level Data Collection Guide](#), Healthy Aging Alberta





HOW

The Strategy for Change

- 1 Education
- 2 Communities of Practice
- 3 Quality improvement
- 4 Collaborations





EMBEDDING SOCIAL PRESCRIBING IN EDUCATION

Implementing social prescribing requires a workforce that is well-educated in the model and trained in the ability to assess individual needs and facilitate linkages to non-medical supports (8). To guide the complex process of revising and innovating curricula, social prescribing should be embedded in competency-based health professions education, which is the widely implemented framework for preparing health professions for practice (91). Addressing the social determinants of health is already included in some training programs for health professional students in different disciplines (92). Greater awareness of the social prescribing model of care and its ability to provide patient-centred care with environmental co-benefits could lead to greater implementation.

Ways to embed social prescribing in education include:

- Integrating social prescribing into entry-level curricula and continuing professional development throughout the curriculum and clinical training for identifiers (prescribers)
- Advocating for social prescribing at the level of professional organizations, advocacy groups, and academic institutions to support the formal recognition of the practice. Policy briefs, documents, reports, and learning practices are useful avenues to raise awareness.
- Appropriately involving educators and students in curriculum development work to understand to what extent social prescribing should be embedded as a standalone topic, module or case example.

CANADIAN SOCIAL PRESCRIBING STUDENT COLLECTIVE

Students and young/early career professionals are invited to build the social prescribing student movement across Canada and globally (11). With over 300+ members, student chapters have been established across university and college campuses, where students have introduced social prescribing onto their campus environment through their health services and classrooms. [Sign up here.](#)

RESOURCES

The Training roadmap provides a detailed overview of existing resources that can support the social prescribing workforce, including guidance on competency domains, learning pathways and suggested skills building.

- [Social Prescribing Training Roadmap, CISP 2024](#)

Open Education Resources

- [Canadian Institute for Social Prescribing - Resources](#)
- [Social Prescribing - Online Course, Alliance for Healthier Communities](#)
- [Social Prescribing PHC, Nova Scotia Health](#)
- [Social Prescribing for Older Adults Program, Healthy Aging Alberta](#)
- [Social Prescribing for Community Pharmacy, UDEMY](#)
- [WHO Toolkit on How to implement Social Prescribing](#)





CONTINUING PROFESSIONAL DEVELOPMENT

Opportunities for social prescribing's inclusion in continued professional development:

- Identifying experts to teach how social prescribing can be used in practice
- Developing opportunities for continuing professional education on social prescribing through educational activities such as hospital-based grand rounds, case discussions, and meetings (94)

INCOPORATE PERSPECTIVES FROM PEOPLE WITH LIVED EXPERIENCE

Teaching social prescribing as a form of patient care in medical curriculum may not always align with the way it is defined from a patient (95). Consider involving participants of social prescribing programs (such as the CISP Patient Advisory Council) in curriculum training and create space to listen deeply to patient voices (96).

SOCIAL PRESCRIBING IN THE CITY COURSE: DALLA LANA SCHOOL OF PUBLIC HEALTH, UNIVERSITY OF TORONTO

In this week-long course, graduate students from across disciplines and professions will be introduced to the theory and practice of social prescribing for healthy cities. The course includes guest lecturers from across Canada and around the world, with visits to social prescribing programs focused on urban health in the Toronto area.

BUILDING COMPETENCE IN PHARMACY EDUCATION

Pharmacists in Norway undergo comprehensive education and training that equip them to understand and address the social determinants of health (93). The educational curriculum includes coursework on public health, health promotion, and social determinants of health, which provides pharmacists with a foundation to recognize and respond to factors influencing patient well-being, beyond medications. However, a survey of pharmacy students and practicing pharmacists found that 67.7% participants were unfamiliar with the concept of social prescribing, emphasizing the requirement for advocacy, awareness, and educational initiatives to be woven into pharmacy programs and continuous education.

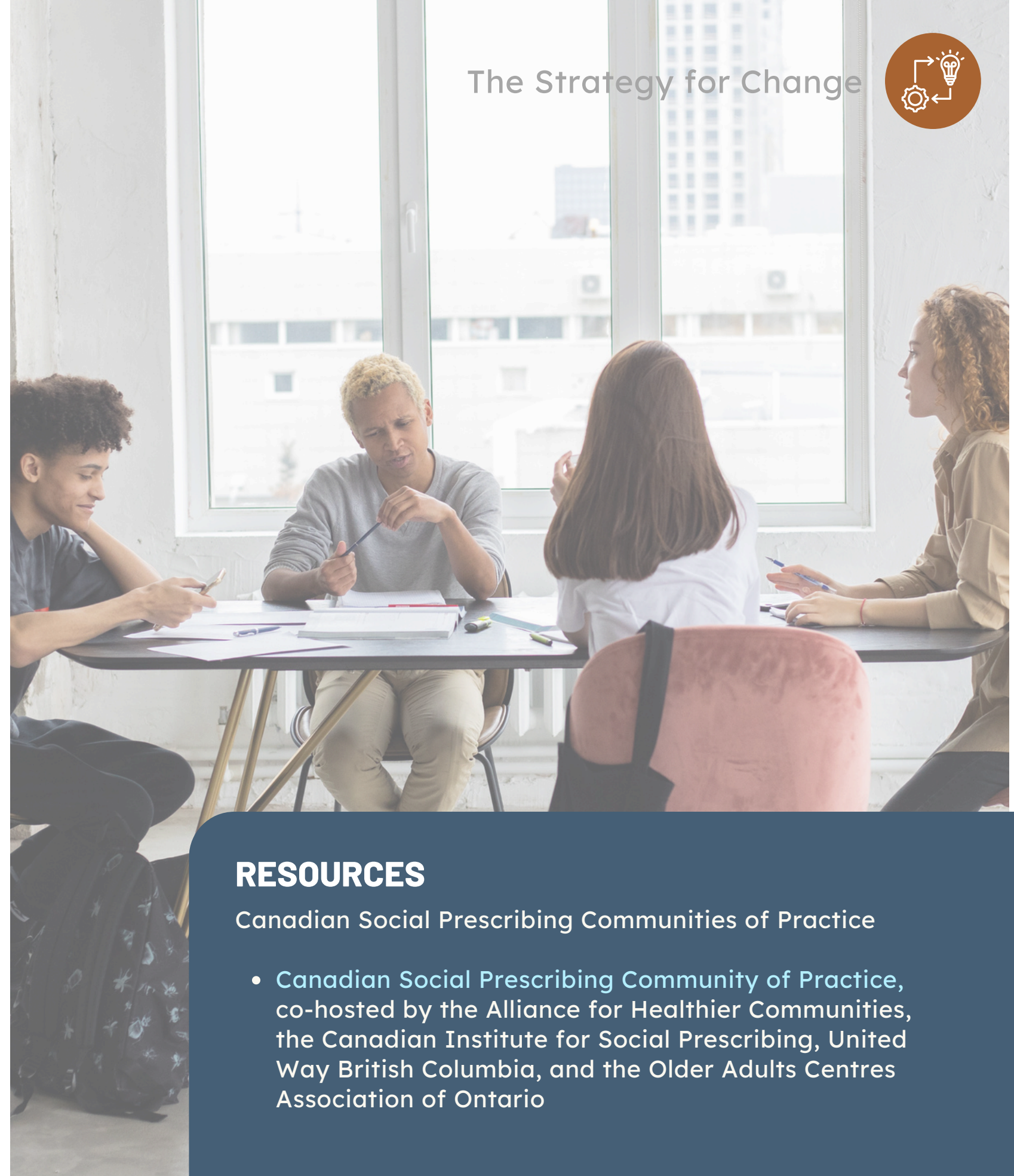




Communities of Practice

Identifying avenues for collaboration and currently existing programs in the community can be supported through Communities of Practice that include identifiers (prescribers) and community partners.

In the UK, the NHS Green Social Prescribing Programme has a Community of Practice to test how to embed green social prescribing in mental health pathways and across integrated care systems (97). Their focus is to develop best practice in making green social activities more resilient and accessible. There are 7 test and learn sites, which are used as case study examples to demonstrate how to spread and scale green social prescribing across integrated care systems (97).



RESOURCES

Canadian Social Prescribing Communities of Practice

- [Canadian Social Prescribing Community of Practice](#), co-hosted by the Alliance for Healthier Communities, the Canadian Institute for Social Prescribing, United Way British Columbia, and the Older Adults Centres Association of Ontario

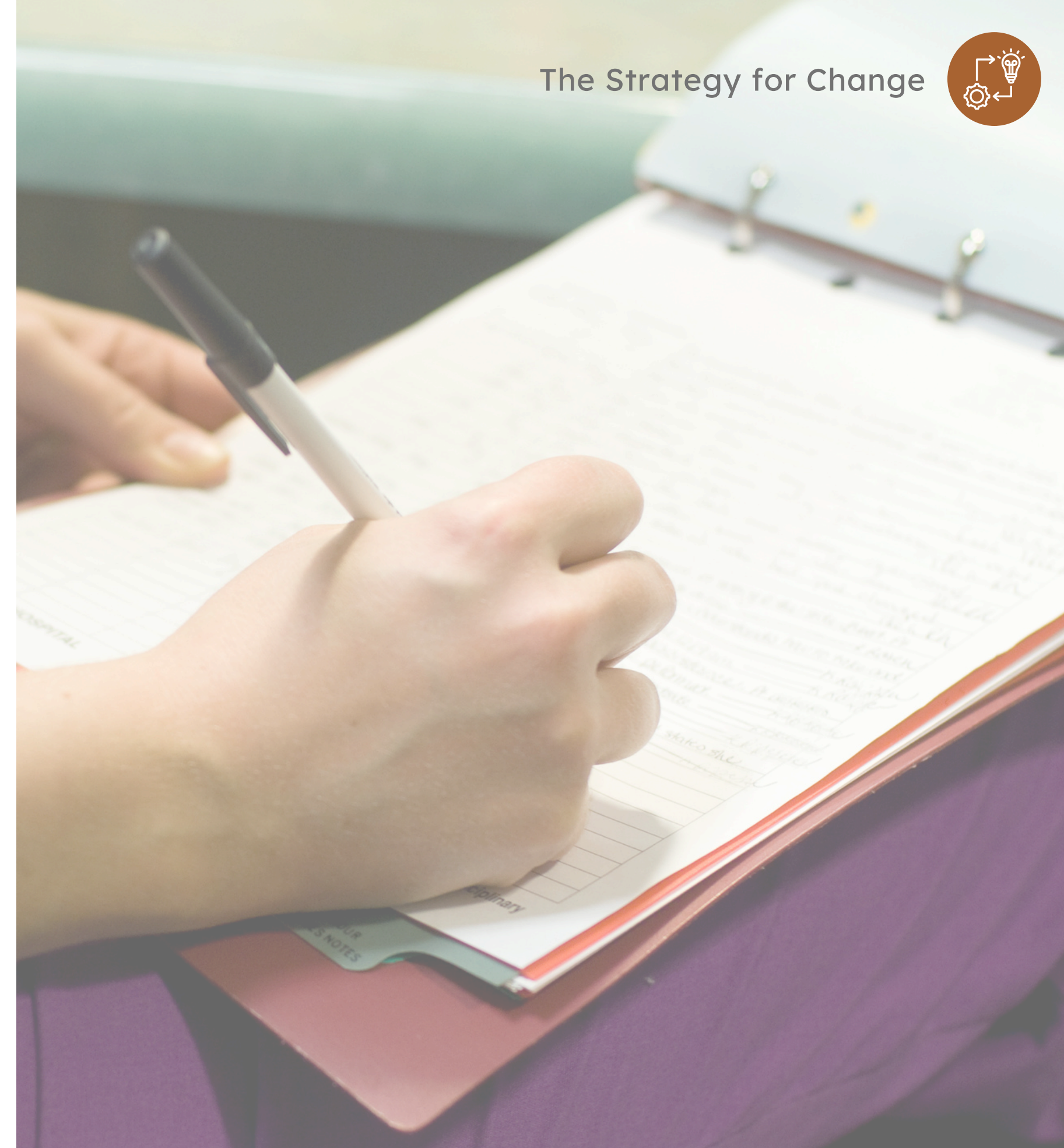




Quality improvement

Quality improvement projects focus on testing change ideas to make improvements in one or more of the domains of quality. The six fundamental domains of quality are safety, patient centredness, effectiveness, efficiency, equity and timeliness (98) and environmental sustainability can be considered a cross-cutting theme across these dimensions (99).

When considering environmental sustainability as an element of quality, the implementation of social prescribing programs can have implications for the equity and safety dimensions (99). For more about integrating sustainability into QI, see [Training for Better Health Outcomes: Integrating Sustainability into Healthcare Quality Improvement Education \(CASCADES\)](#).





Collaborations

FRAMING THE ISSUE

Research suggests that framing climate change in terms of public health may make it more personally relevant and emotionally compelling for Canadians, as the information can increase a willingness to engage in pro-environmental behaviours and support climate change policies (100).

BUILD ON EXISTING SUPPORT

The Canadian Medical Association recognizes the importance of social prescribing, and green nature programs such as PaRx, which was recommended as a call to action in its [Environmentally sustainable health systems in Canada](#) policy.

MULTI-LEVEL COLLABORATIONS

Cross-sectoral	The economic arguments for greater upstream investment from within, and outside of, the health sector provides incentives for sectors to work together on social prescribing activities. Often, sectors are occupied with sector-specific financial pressures such as concerns about resource shortages and economic sustainability. However, framing and encouraging sectors to consider the “bigger picture” of community health may highlight opportunities to align short-term objectives with long-term goals. There is a need for substantial and sustained investment in community and place-based solution such as nature-based interventions (101).
Across organizations	Highlighting the potential for social prescribing to be adopted across a range of health professionals, community partners and researchers ensures that the growing practice is effective, equitable, meaningful, measurable and health-promoting (9).
Within organizations	Look for opportunities to align with strategic priorities and supportive policies and build capacity across the organization.



RESOURCES

See the [CASCADES Strategic Planning for Sustainable Healthcare](#) playbook for more resources on implementing sustainable practices .





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