



SOCIAL PRESCRIBING

AGE FRIENDLY
Manitoba



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Why Social Prescribing?

Many things that affect our health cannot be treated by doctors or medicine alone, like loneliness, isolation or stress due to problems with debt or housing. Social prescribing connects people to non-medical support to address these issues and other unmet needs.

This could involve a Senior Resource Coordinator/Finder or an equivalent role:

- Helping someone who is isolated to join a befriending group, an art class or a community gardening project, based on what matters to them.
- Connecting someone struggling with financial stress to a service that helps with managing debt or claiming benefits.
- Working with someone with high blood pressure to take up a form of exercise that they're comfortable with.

Social prescribing involves understanding the complexities of people's lives and the inequalities they may face. It can help change the circumstances that make people unwell, and empower people to manage existing health problems. It can help people to connect and to grow in confidence.

The Manitoba Implementation Team is working diligently to have social prescribing a reality across the province.

We are focused on creating a seamless system that connects individuals with non-medical resources to improve their overall well-being. It is not without hurdles however our team is diligently working to pave the way for a holistic approach to healthcare that considers not just physical & mental health, but also social wellness.

We aim to empower individuals to take control of their health journey and be able to access the support they need to thrive. With dedication and passion, the Manitoba Implementation Team is poised to make a significant impact on the lives of many in the province.

To learn more about implementing social prescribing:

- In Manitoba contact [Manitoba Association of Senior Communities](#)
- [Alliance for Healthier Communities - social prescribing community of practice](#)
- [Canadian Institute for Social Prescribing](#)
- [World Health Organization - toolkit on social prescribing](#)



Manitoba is part of a world wide movement embracing and promoting the value of Social Prescribing!

The United Kingdom is celebrating Social Prescribing day on March 14th!

Check out their [Facebook](#) page for great information, resources and ideas!



National Academy for Social Prescribing

"Doctors are slammed with non-medical cases. Some say social prescribing could ease the burden."

CBC NEWS



DR. SANDOR DEMETER AND DR. MICHAEL ROUTLEDGE

MANITOBA is part of an international movement that's writing prescriptions for seniors that can't be filled at a pharmacy. These are "social prescriptions" that connect seniors with community services, such as exercise and art classes.

Recent reviews have documented the negative health impacts of social isolation in seniors, including heart disease, mental illness and shortened life spans.

The COVID-19 pandemic highlighted the negative impact social isolation has on seniors. Many Manitobans have shared heartbreaking stories about not being able to visit or care for their older loved ones during the COVID lockdown. COVID exposed gaps in Manitoba's care system for older adults.

Social prescribing is one solution to improving the quality of life for older adults. It connects seniors with community services "in order to improve their social connections, health and well-being," says the Manitoba Association of Senior Communities website.

Social prescribing brings seniors together in meaningful ways. And it works.

About half of those receiving social prescriptions felt less lonely, 12 per cent reported better mental health and 19 per cent were more socially active, according to the 2020 Ontario-based Alliance for Healthier Communities' Social Prescribing in Ontario report.

Social prescribing is an international trend, with the Canadian Institute for Social Prescribing hosting its first international social prescribing conference next fall in Toronto.

CISP advocates social prescribing to address a broad set of social determinants of health, including loneliness, isolation, racism, ageism, poverty and homelessness. The Manitoba Association of Senior Communities is leading the way in advocating and facilitating social prescribing for seniors across Manitoba.

MASC received more than \$1 million in 2022 from a private donor to fund a pilot project to support social prescribing activities across the province over four years. This funding helps strengthen MASC's relationship with other senior support agencies, such as Active Aging in Manitoba, which promote "active lifestyles for all older Manitobans."

MASC helps identify and link seniors with a broad and diverse set of community resources and activities.

Once a health-care worker — a family physician or nurse practitioner, for example — writes a social prescription, a senior resource co-ordinator (SRC) plugs the senior into community services and activities based on their needs and interests. "The role of the SRC is to connect seniors with resources and opportunities in the community," says Connie Newman, executive director of MASC.

If there is a cost, seniors are responsible for paying for community-based activities and services, although there is usually some room for negotiating these costs, Newman says.

The Transcona Council for Seniors houses one of 10 Winnipeg Regional Health Authority-funded senior resource co-ordinators in Winnipeg. One of the many benefits of the social prescribing programs is identifying hard-to-reach isolated seniors, who, on their own, would have never connected with seniors' social programs, says Colleen Tackaberry, senior resource co-ordinator with the Transcona Council for Seniors.

For example, a primary-care professional identifies a senior who would benefit from a specific community-based program but is unaware of what programs and resources are out there.

With the consent of the senior, the primary-care professional would write a social prescription tailored to the senior's preferences and pass the prescription onto a senior resource co-ordinator, who would work out all of the logistics.

The isolation impact of COVID persists in Transcona, with attendance at seniors' events still below normal. Pre-COVID, about 120 seniors participated in zumba classes and pickleball, for instance. The number fell to zero during COVID and has returned to about 100 this month, according to Tackaberry.

One of the biggest challenges facing MASC's rollout of social prescribing is communication technologies, says Newman. There is no single communication system for health-care providers to write social prescriptions, with most physicians' offices and hospitals still using fax machines or institution-specific electronic medical records.

Of the 10 senior resource co-ordinators, "I believe that I am the only co-ordinator that has a fax machine," says Tackaberry.

MASC and the senior resource co-ordinators are also working hard to engage with family physicians and primary care teams on creating the mechanisms for social prescriptions.

The pilot program is new, so information on the number of social prescriptions written and what impact these have had are not yet available. However, evaluation has been built into the pilot to demonstrate whether it works.

And the evidence from other social prescribing initiatives is clear. "This will benefit everyone," says Newman. "Social prescribing is one the best kept secrets!"

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