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Summary Recommendations Report

Social Prescribing for Young People in the West Midlands: The Potential Impact on Employment and the Economy

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“Having a job is one of the best health protectors we can have, having a routine, a purpose and an income in order to manage your daily life is life changing... Gaining employment can be life changing and support people to recover from debt, mental health issues, lack of confidence and start someone on a journey to change”
(Survey respondent)

Introduction

Social prescribing aims to help people access local, non-clinical services and activities provided by voluntary and community organisations in order to support their social, emotional and practical needs¹. The topic of social prescribing for young people is gaining traction nationally, but there remains a need to collect evidence in order to better understand its effectiveness. This document summarises a rapid scoping review and regional survey of need for, and provision of, social prescribing for young people. This report presents initial findings and recommendations and is intended to inform and stimulate discussion with practitioners, policy makers, commissioners, and researchers in the field.

In January 2023, we published a [Research Digest](#) which summarised a rapid scoping review of the need for, and provision of, social prescribing for young people in the region. The key messages from this research digest were that:

- 1 Dedicated social prescribing provision for children and young people is new and growing. There is currently little published evidence of its effectiveness, but research is underway to address this.
- 2 There is potential for social prescribing to impact positively on the wellbeing of young people. While there is little tangible evidence to this effect currently, the novelty of this review concerns the further potential for impact on economic and employability aspects – and the links between these and wellbeing.

In February and March 2023, we surveyed organisations across the region¹ about social prescribing provision for young people in the West Midlands and its economic and employability impact.

¹ When focussing on the West Midlands, we refer to the seven metropolitan boroughs – Birmingham, Coventry, Dudley, Sandwell, Solihull, Walsall and Wolverhampton. Given the relatively early development of social prescribing for young people the age range has been left broadly open to ensure we included as much relevant data as possible. The age range used to define a young person for this project was up to the age of 25, in order to ensure we could explore the economic impact of social prescribing in terms of potential effect on employment. While we have identified an upper age limit - to allow the opportunity to differentiate between ‘adult only’ services and those which provide support to younger people - a lower age limit was not defined for the purpose of this project.

Summary of Key Findings

Our Research Digest comprised a rapid, desk-based scoping review of existing literature (both academic and grey literature) in the field of social prescribing provision for young people, predominantly within the West Midlands. The key findings from this document can be grouped into four themes:

Theme	Description
Need	There is a clear need for specific social prescribing services to be made available for young people in the West Midlands , to support existing formal provision for both mental health and wellbeing and for employment.
Provision	There is a lack of publicly available information on what social prescribing provision is available for young people in the West Midlands, and how it could support young people in the move away from benefits and into the workplace. Yet we know provision for young people does exist within the West Midlands.
Opportunities	The benefits of social prescribing (related to employment) can include developing personal skills , including building resilience and relationships , which could be transferable to the workplace. There is the potential for social prescribing to have benefits both for the individual and the economy , particularly from those services which focus on financial and employment support. These positive aspects of social prescribing would be of benefit to young people in the West Midlands.
Challenges	Barriers to young people accessing social prescribing include the cost and difficulty of travel, language barriers, and lack of cultural appropriateness. This can lead to young people, particularly those who identify as being from Global Majority groups, disabled and/or low income being excluded and thus feeling discouraged from taking part in social prescribing activities.

This review found little information which evaluates the benefits of social prescribing for young people in the West Midlands specifically in terms of providing an economic benefit or enabling a transition into the workplace. There is thus a need for robust, consistent, and effective evidence collection and evaluation.

Following our review, social prescribing referrers, practitioners, and professionals were invited to complete a survey which aimed to gather first-hand accounts of how and why such services can make an impact on youth employment, and on the region's economy. We received responses from seven organisations, four of them being from social prescription providers within the seven metropolitan boroughs of the West Midlands. These four were then invited to respond to further questions raised through the initial review of responses to further inform our understanding of the topic. One organisation kindly provided more information in this manner.

The free text elements of the survey allowed us to gather valuable data on the experiences of respondents. Five of the respondents offered social prescribing services for young people, and all agreed that there was a need for such services in the West Midlands.

The following anonymised responses detail the reasons for which young people in the West Midlands are referred to, or seek, social prescribing:

- Social, emotional and mental health difficulties (SEMH) in mainstream school
- Lack of confidence, mental health, relationship breakdown, homelessness, care leaver and lack of community support
- Anxiety and social isolation/loneliness
- Mental health support, family/peer relationships

The following quotes from respondents illustrate the benefits of social prescribing services for this age group which were noted through this project:

“It supports their physical activity and promotes their physical health as well as stimulating mental wellbeing”

“...Our previous projects help families have pride in their local area, access green space, learn skills or explore crafts which can be recreated easily and cheaply. They feel welcome and safe”

“At the start of the service young people are often pre contemplative and would not have the confidence to attend a gym, engage with activities and by the end they graduate with a year’s gym membership, new friends, new skills and a different outlook”

“Improved wellbeing, increased engagement in school and community”

While three of the five providers either offered advice on economic areas or signpost to relevant agencies, all respondents agreed that there is a beneficial **economic impact** to social prescribing – with three providers giving direct and indirect examples of this within their own service, and four respondents agreeing that social prescribing directly/indirectly contributes to bringing people off benefits and other funding support, as noted through the following quotes:

“Connect with other people and develop new interests & hobbies which improve mental health, physical health (e.g. through exercise and build resilience, decreasing the likelihood of entering statutory services)”

“Too early to assess as social prescribing is in its early stages. However I have witnessed the long term impact of cycling for health projects that enabled young people to explore the great outdoors and tour other regions away from their locality. It widens their horizons, expands their social connections and improves their ability to think outside the box”

“One of our young ... service users became an informal volunteer, gained skills and strength, developed coping strategies such as pacing for fatigue, he returned to his original workplace in a foundry”

“... I currently employ a community health champion who was once a social prescribing customer. Building confidence and aspirations all comes with social prescribing”

“Indirectly by improving resilience and engagement with education which improves opportunities for work”

One respondent expanded on this by highlighting their organisation’s corporate plan which states one of their aims as providing support to vulnerable young people to enable them to maintain tenancy arrangements and make a “successful transition to adulthood”.

Specifically, social prescribing is seen to contribute to a move **towards employment** and the gaining of positive life skills in the following ways:

- Increased ability to learn skills relevant for employment
- Increased confidence
- Enabling a return to paid work and further education and training
- Increased control over use of time and activities undertaken, leading to more positive choices

Our research suggests that currently the definition of social prescribing differs across providers, and that in order to engage with policy makers there needs to be consensus on what it is and what impact it can have.

“In a time when acute services are stretched and demand outweighs capacity there needs to be a focus to move to preventative approaches that will stop people re-attending time after time but social prescribing as a service needs to have the evidence base about its impact in order to influence this change.”

(Survey respondent)

Further, respondents suggested the following **improvements** within the social prescribing sector and wider referral system:

- Continued development of an effective pathway from referring organisations to providers
- A more accessible and visible service model
- A more attractive social prescribing offer including link workers with lived experience whom service users can relate to
- Ongoing financial support and additional link workers for young people, including those who are home educated

Conclusions and Recommendations

We found that the survey responses corresponded with our initial findings from the Research Digest in that any social prescribing provision for young people is relatively new (within the last few years) and that there is very little evaluation to date – particularly on economic and employability impacts.

Research Digest	Survey Findings
<p><i>Dedicated social prescribing provision for children and young people is new</i> are but growing. <i>There is currently little published evidence of its effectiveness</i>, but research is underway to address this.</p> <p>There is <i>potential for social prescribing to impact positively on the wellbeing of young people</i>. While there is little tangible evidence to this effect currently, the novelty of this review concerns the further potential for impact on economic and employability aspects – and the links between these and wellbeing.</p>	<p>The survey responses correspond with this - <i>any provision for young people is relatively new</i> (within the last couple of years) <i>and there is very little evaluation to date</i> – particularly on economic and employability impacts.</p> <p>5 respondents offer social prescribing services for young people, and all agreed that <i>there was a need for social prescribing for children in the West Midlands</i>. Potential economic and employment impacts of social prescribing reported included: Returning to work; Gaining transferable skills; Building confidence and aspirations; and Improving engagement with education which in turn improves opportunities for work. Further, <i>social prescribing can be seen to play a role in moving young people away from benefits and into employment</i> - This can include through increasing confidence, and making more positive choices.</p>
<p><i>The benefits of social prescribing</i> (related to employment) can include <i>developing personal skills</i>, including <i>building resilience and relationships</i>, which could be transferable to the workplace. There is the <i>potential for social prescribing to have benefits both for the individual and the economy</i>, particularly from those services which focus on financial and employment support. <i>These positive aspects of social prescribing would be of benefit to young people in the West Midlands</i>.</p>	<p>Identified <i>impacts of social prescribing</i> for young people include: <i>promoting physical and mental wellbeing; A positive, supportive community; Improved confidence; Developing new interests; and Increased engagement</i> with school and their community.</p>

To conclude, our research to date shows that there is clearly a need for specific social prescribing services for young people in the West Midlands, to support both mental health and wellbeing and for employment. However, such provision is in its infancy, and further evaluation is required specifically for the age group in question as “75% of mental health problems are established by the age of 24”ⁱⁱ. Both the research digest and the survey findings illustrate the potential benefits of social prescribing however the survey responses also highlight the need for a more interconnected approach to provision and a greater understanding of the value of provision which is already available. Further, it appears that there is no clear and consistent method of evaluation. This is an area which is currently being considered within the sector, but it may be some time until there is a solution to this.

While there were no survey responses which suggested any barriers to young people accessing social prescribing, as initially suggested through our research digest, this information would remain helpful in the development and delivery of services, so would therefore be worthy of further exploration.

Bibliography

ⁱ Buck, D., & Ewbank, E. (2020). *What is social prescribing? The Kings Fund*. Available from: <https://www.kingsfund.org.uk/publications/social-prescribing>

ⁱⁱ Kessler RC, Berglund P, Demler O, Jin R, Merikangas KR, Walters EE. (2005). Lifetime Prevalence and Age-of-Onset Distributions of DSM-IV Disorders in the National Comorbidity Survey Replication. *Archives of General Psychiatry*, 62 (6) pp. 593-602. doi:10.1001/archpsyc.62.6.593.