

*Media Release Tuesday 11 February 2020*

## *Social prescribing – a remedy to counter chronic health problems*

Australia should use social prescribing to counter rising chronic health problems, according to a new report from the Royal Australian College of General Practitioners (RACGP) and the Consumers Health Forum (CHF).

Social prescribing involves the referral of patients to non-medical activities, ranging from health and fitness programs to movie clubs and meditation.

The Social Prescribing report, launched today, recommends that social prescribing be incorporated into routine health care in Australia. The report comes after a roundtable co-hosted by the RACGP and CHF in partnership with the National Health and Medical Research Council Partnership Centre for Health System Sustainability, and a consultation process.

Surveys commissioned for the initiative indicate that while many patients in Australia would welcome such approaches, they are often not available.

Of the 200 plus consumers surveyed, 88 per cent agreed or strongly agreed that community programs and services could help their health and wellbeing. But 57 per cent said their GP never discussed using such services to improve their health.

In a survey of around 140 GPs, 70 per cent said they believed referring patients to community activities, groups or services improve health outcomes, yet most said they did not have links with such services.

RACGP President Dr Harry Nespolon said that GPs had a central role to play in social prescribing.

“At the frontline of healthcare, GPs are best placed to employ social prescribing to help improve their patients’ health and wellbeing.

“We’ve seen this approach used successfully internationally, such as in the United Kingdom and promising trials in Canada and Singapore – it could help shift the balance to focus to prevention and early intervention for patients.

“With the huge challenges we face regarding rising chronic illness, mental health issues, isolation and loneliness and the resulting costs, we urgently need to consider our approach to healthcare in Australia – social prescribing offers an innovative solution.

Dr Nespolon said that while some GPs already employ social prescribing in Australia and trials are underway by organisations such as IPC Health in Melbourne and Inala Primary Care in Brisbane, more resourcing and recognition is needed to implement it in a sustainable way.

“Social prescribing offers a huge opportunity to improve patient health and wellbeing and cut the costs of chronic disease, but it won’t happen unless everyone can access it.”

CHF CEO, Leanne Wells, said: “This is a vital development for patients. It provides a plan to develop more effective care.

“Social prescribing can help to address the social determinants of health, such as low education and income, which can affect people’s health and wellbeing. It has become particularly important given rising rates of chronic illness, mental health issues, social isolation and loneliness, many of which cannot be treated effectively with a medical approach alone.

“Health expenditure also shows that health care has increasingly shifted to expensive hospital settings. As our population ages and we see rising rates of obesity and chronic disease, the demand for such acute services will only increase if we continue on this same trajectory.

“We need to find more effective ways to keep people out of hospital in order for our health system to remain stable.”

Patients who participated in a social prescribing pilot in Melbourne found it helped significantly with their conditions and reduced their reliance on medications.

Brenda Hoy, who has lived with depression for 30 years, described her experience with social prescribing as “life changing”.

Ms Hoy, 70, said the support she received to pursue her love of writing helped her to significantly reduce her reliance on medication and psychological counselling.

Another participant, Helen Longhurst, who has lived with the constant pain of fibromyalgia for 10 years, said she has “not looked back” since she had the opportunity to access social prescribing and was advised to join a chronic pain support group.

Through the program, Ms Longhurst, 58, was guided to find an alternative approach to manage her condition, joining a chronic pain support group. “I hope social prescribing will become much better known. It’s definitely a good thing,” she said.

The report includes a number of recommendations for the broader adoption of social prescribing, including:

- Incorporate social prescribing into the Commonwealth’s 10 Year Primary Health Care Plan, with recognition of the need for funding and implementation support to ensure a more comprehensive patient-focused health system
- Support for ‘link workers’ to help connect patients to community services, identifying where skills already exist and developing training and qualifications where needed
- Governments to work with local councils and peak organisations to identify community services and groups that could contribute to a social prescribing scheme
- Primary Health Networks (PHNs) to expand Health Pathways to include a social prescribing pathway for patients

*\* The Australian Government Department of Health, the National Mental Health Commission and Capital Health Network provided funding to support the social prescribing report and roundtable.*

**The Social Prescribing Roundtable Report can be viewed online here:**

[https://www.chf.org.au/sites/default/files/social\\_prescribing\\_roundtable\\_report\\_chf\\_racgp\\_v11.pdf](https://www.chf.org.au/sites/default/files/social_prescribing_roundtable_report_chf_racgp_v11.pdf)

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RACGP President Dr Harry Nespolon and CHF CEO, Leanne Wells, are both available for interview.

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## About the RACGP

The Royal Australian College of General Practitioners (RACGP) was established in 1958 and is Australia's peak general practice representative organisation.

The RACGP has more than 39,000 members working in or towards a career in general practice across metropolitan, regional and rural areas of the country. Nine in every 10 GPs are with the RACGP.

A core objective of the RACGP is to raise awareness of Aboriginal and Torres Strait Islander health needs. As a result, the RACGP established a dedicated Faculty for Aboriginal and Torres Strait Islander Health in 2010 to help 'close the gap'. The Faculty has more than 8,000 members either working in the Aboriginal and Torres Strait Islander healthcare sector or who have a passion and interest in this area. The RACGP undertakes a range of activities to ensure the delivery of high quality culturally responsive care and to assist in the growth of the Aboriginal and Torres Strait Islander general practice workforce.

Visit [www.racgp.org.au](http://www.racgp.org.au). To unsubscribe from RACGP media releases, [click here](#).

## About CHF

The Consumers Health Forum of Australia (CHF) is the national peak body representing the interests of Australian healthcare consumers. CHF works to achieve safe, quality, timely healthcare for all Australians, supported by accessible health information and systems. CHF member organisations reach thousands of Australian health consumers across a wide range of health interests and health system experiences.

Visit [www.chf.org.au](http://www.chf.org.au).