

Social prescribing for people Social prescribing for people Social prescribing for people

living with HIVEmily Edwards, Bridie Howe





Background:

Research suggest individuals living with HIV have higher rates of mental health conditions. NHS Scotland patients can now receive treatments which suppress the human immunodeficiency viruses to an undetectable level. However, well-being also includes an individual's psychological and emotional state. Thus, treating a patient living with HIV must include psychological support. [1] Social prescribing has the potential to improve individual's mental well-being. It is currently mainly prescribed in primary care by general practitioners. Research has shown social prescribing can also make individuals feel less isolated, build communities and improve physical health. [2] Thus, it can potentially be used in conjunction with other treatments to support mental health conditions experienced by individuals living with HIV. [3]

A 2021 audit for NHS Highlands sexual health department investigated the prevalence of mental health issues for patients living with HIV. A recommendation by the audit was to have 'Further psychological options be made available to allow HIV clinicians to more easily signpost this to their patients'. [4] Social prescribing is a potential treatment for mental health issues.

Aims:

- Investigate what mental health conditions need support within this highland community and what current treatments are being prescribed.
- Investigate whether people living with HIV would engage with social prescribing (through secondary care) and what are the barriers to accessing these services.
- Research and coordinate a list of potential social prescribing resources within the highlands.

Methods:

The 'British HIV association (BIHVA) standards of care 2018 report' [1] was used to assist in composing the questions. An example of this was whether individuals wanted one to one support from a peer living with HIV, [1] with regards to emotional well-being the BHIVA standards quality statement states: 'Peer support should be discussed and available to all people living with HIV, and form part of their clinical care pathway options'. [1]

A further option given was whether individuals wanted one to one support from a trained professional. BHIVA standards quality statement on mental health states: 'The mental healthcare professional working with someone living with HIV should have up-to-date HIV-specific knowledge and cultural competencies.' [1] By asking these questions the questionnaire was guided by BHIVA quality statements



[5]

considered project whether social prescribing for patients living with HIV in the highlands could have 'sustainable value'. 'SusQI'[5] is quality improvement framework which looks at improving a service from a sustainability perspective. Its principal aim is for healthcare development 'to deliver maximum health gain with minimum financial cost and harmful environmental impacts, whilst adding social value at every opportunity'.



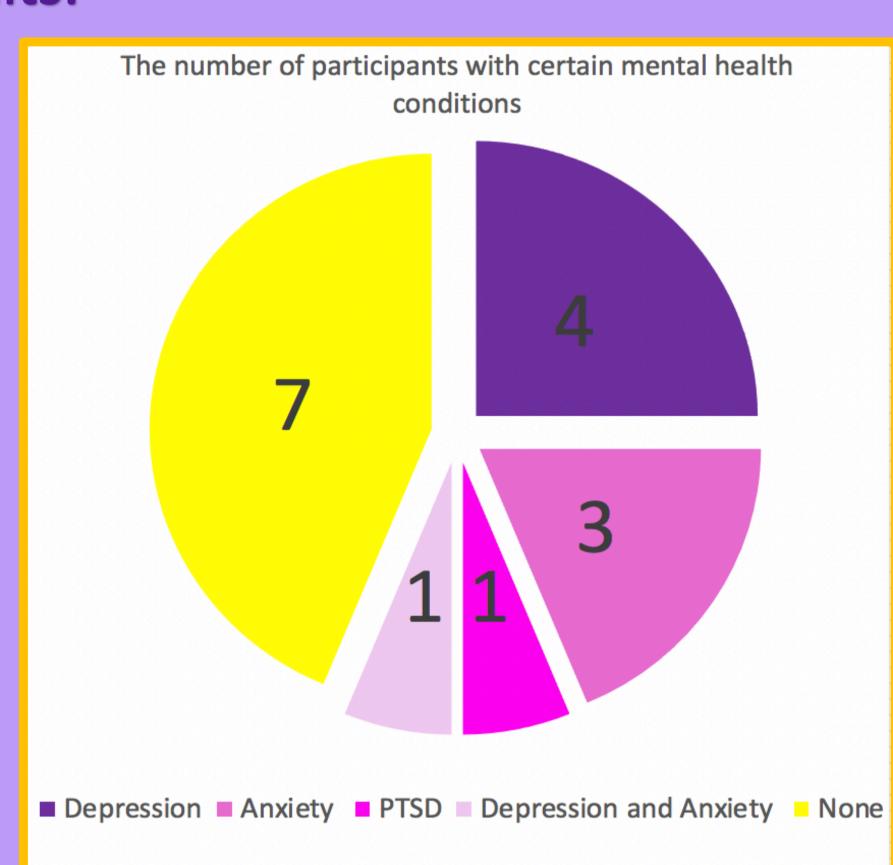


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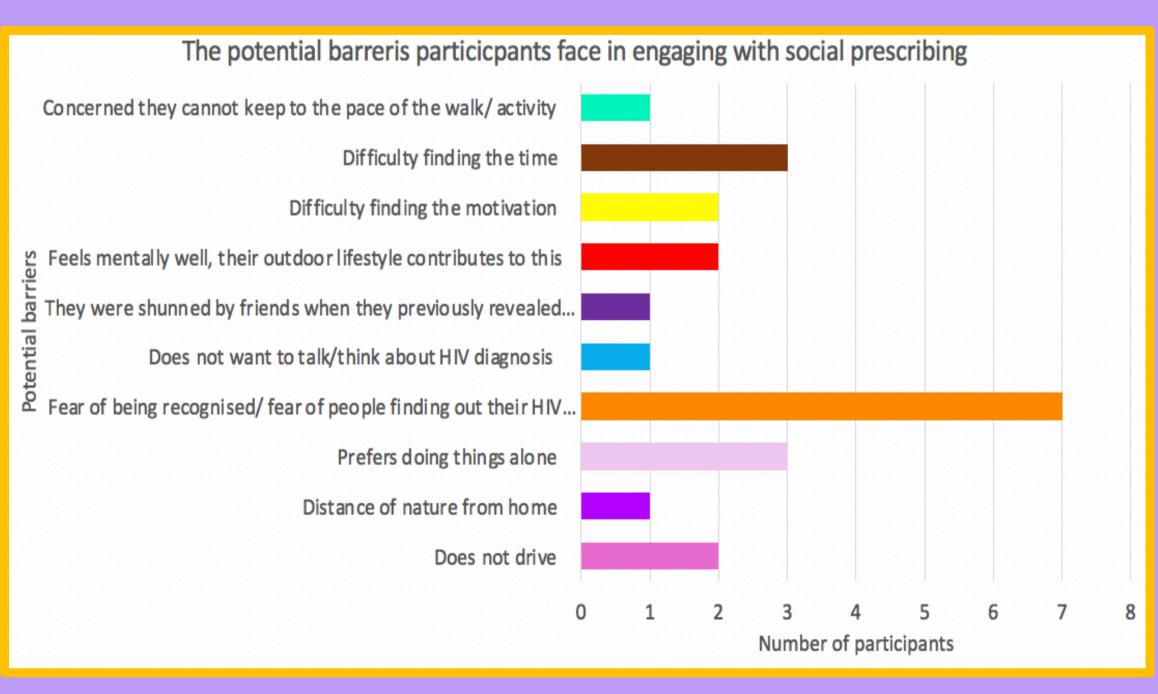
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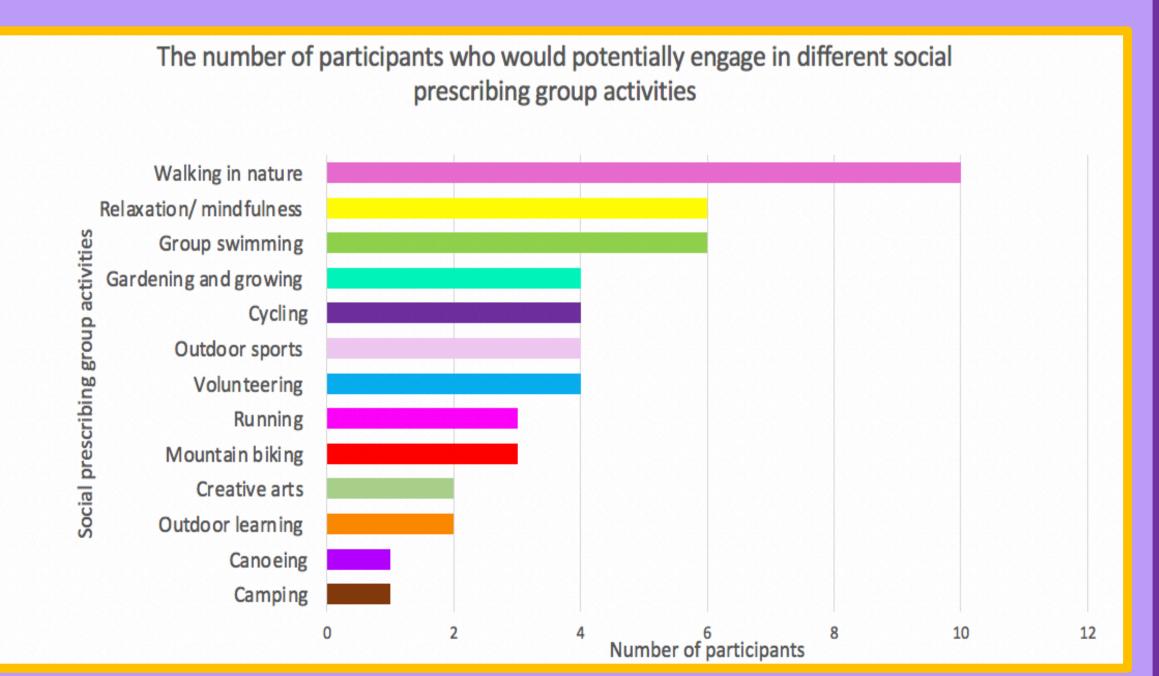
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Results:



56.25% of the participants had been diagnosed with a mental health condition, and 62.50% were either diagnosed or believed they had mental health issues. Of the 16 participants questioned, 43.75% answered that living with HIV contributed negatively to their mental health. Showing higher rates of mental health conditions compared to the general Scottish population. 93.75% of participants showed an interest in at least one social prescribing activity. The main barrier expressed to engaging with social prescribing was patients fear of their HIV status being revealed; with 43.75% expressing this particular concern. Data analysis showed there was no correlation between being diagnosed with a mental health condition and wanting to engage with social prescribing. Those without a diagnosis were as likely to choose a social prescribing activity.







[7]

What is social prescribing?

Social prescribing is where health professionals recommend (self-referral) or refer people to a range of local, clinical, third sector services. It is currently mainly used in primary care by GPs, practice nurses and link workers. A 2020 publication by the Kings Fund explains that, 'schemes are focused on improving mental health and physical wellbeing. Those who could benefit from social prescribing schemes include people with mild or long-term mental health problems...people who are socially isolated and those with multiple long-term conditions...' [6]

The <u>'Think Health, Think Nature'</u> [7] toolkit for green prescription is a highland specific social prescribing initiative which catalogues a range of nature-based activities organised by non-clinical sources within the community.

Future work:

The 3 most popular social prescribing activities were 'walking in nature', 'relaxation/mindfulness', 'group swimming'. There was also a substantial amount of cycling schemes (4th most popular option). Therefore, third sector organisations which offered these programs were considered. The resources used to gain information on potential programs were:

1. Think Health, Think Nature, [7]. 2. Natural Health Service [8] 3. Padlet.com -Fairfield medical [9]

Walking in nature:

- Paths for all think nature health walks [10]
- Nature 4 health [11]
- Clarity walk [12]
- Partnerships for wellbeing health walks [13]

Relaxation and mindfulness:

Highland yoga collective [14]

Palouse Mindfulness online course [15]

Mindfulness Scotland – audio mindfulness practices [16]

One moment meditation app [17]

Cycling:

- Active Health Project Velocity[18]
- Velocity cycle to health [19]
- Kyle Community E-Bikes [20]

Group Swimming:

The Outdoor Swimming Society
[21]