

Introduction

- Members of low-income families, living in the most deprived areas in Scotland are particularly at risk of suboptimal nutrition and obesity. Many initiatives have been introduced into communities over the last 20 years to try and tackle obesity in lower-income households with limited success.

The SPICE project aims to explore the potential of social prescribing in connecting low-income clients with an expanded range of support, including community food programmes to help improve the range and quality of food consumed at home.

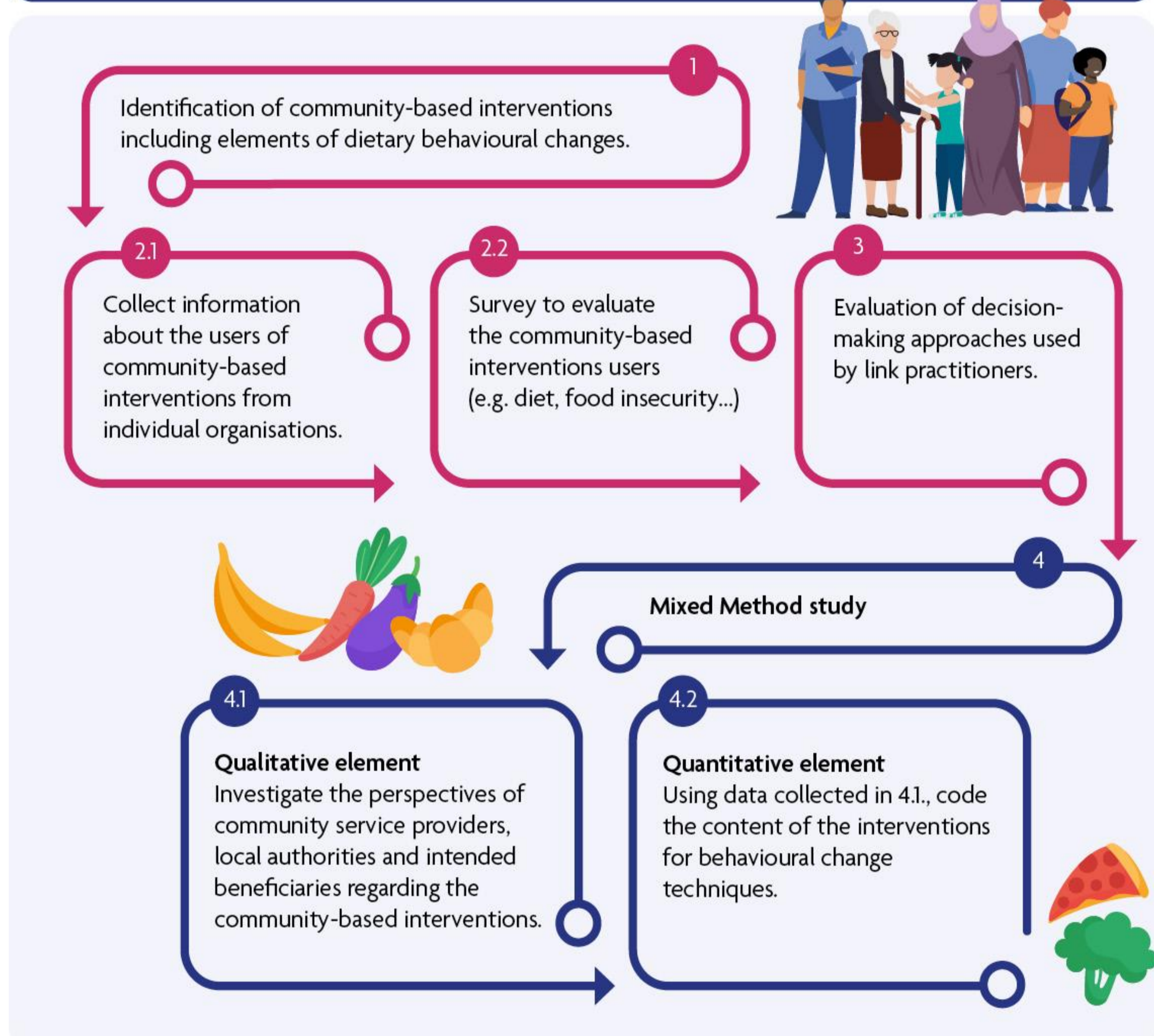
- Social prescribing schemes, which connect primary care patients with non-medical sources of support within their community, have mainly focused on improving mental health and physical well-being, generally targeting people from lower-income communities with a higher risk of suboptimal nutrition and mental health difficulties. Therefore, social prescribing could provide a promising platform to support improved eating practices in their client households, a potential currently under-realised.



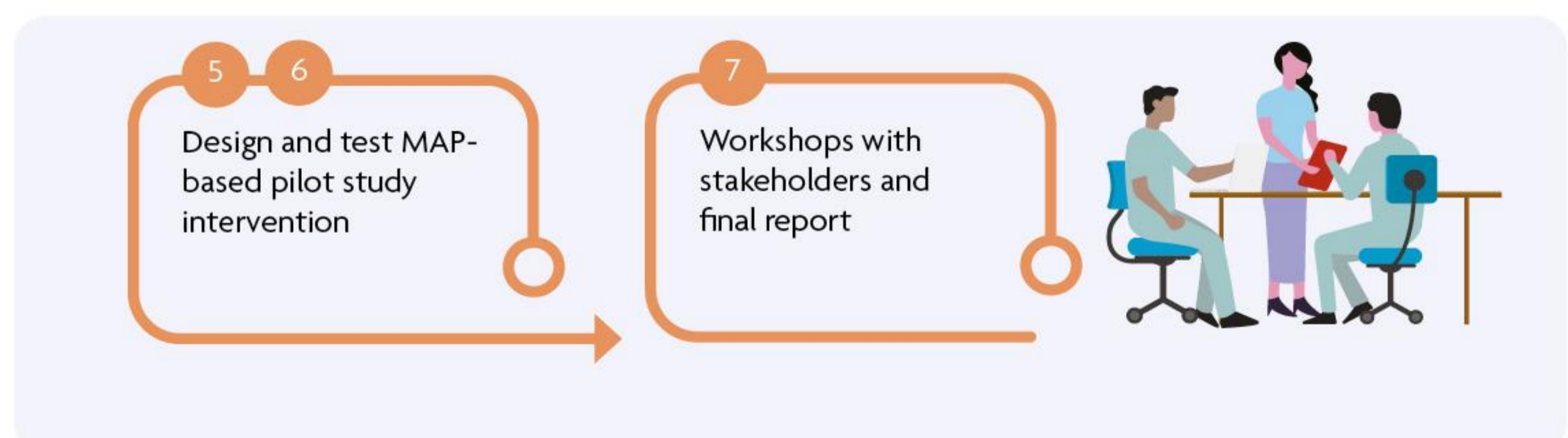
Aims

- Our 5-year research programme has two main aims:

- Find out what community initiatives are currently running in Aberdeen city that are intended to support positive changes to food practices for low-income households and map out the content of these initiatives.



- Take the best parts from these existing initiatives and combine them with elements that we know (a) are helpful when we want people to change their behaviour and (b) the community wants. We will use all of this to create a tool for social prescribers that can be used to support people to make positive changes to their diet.



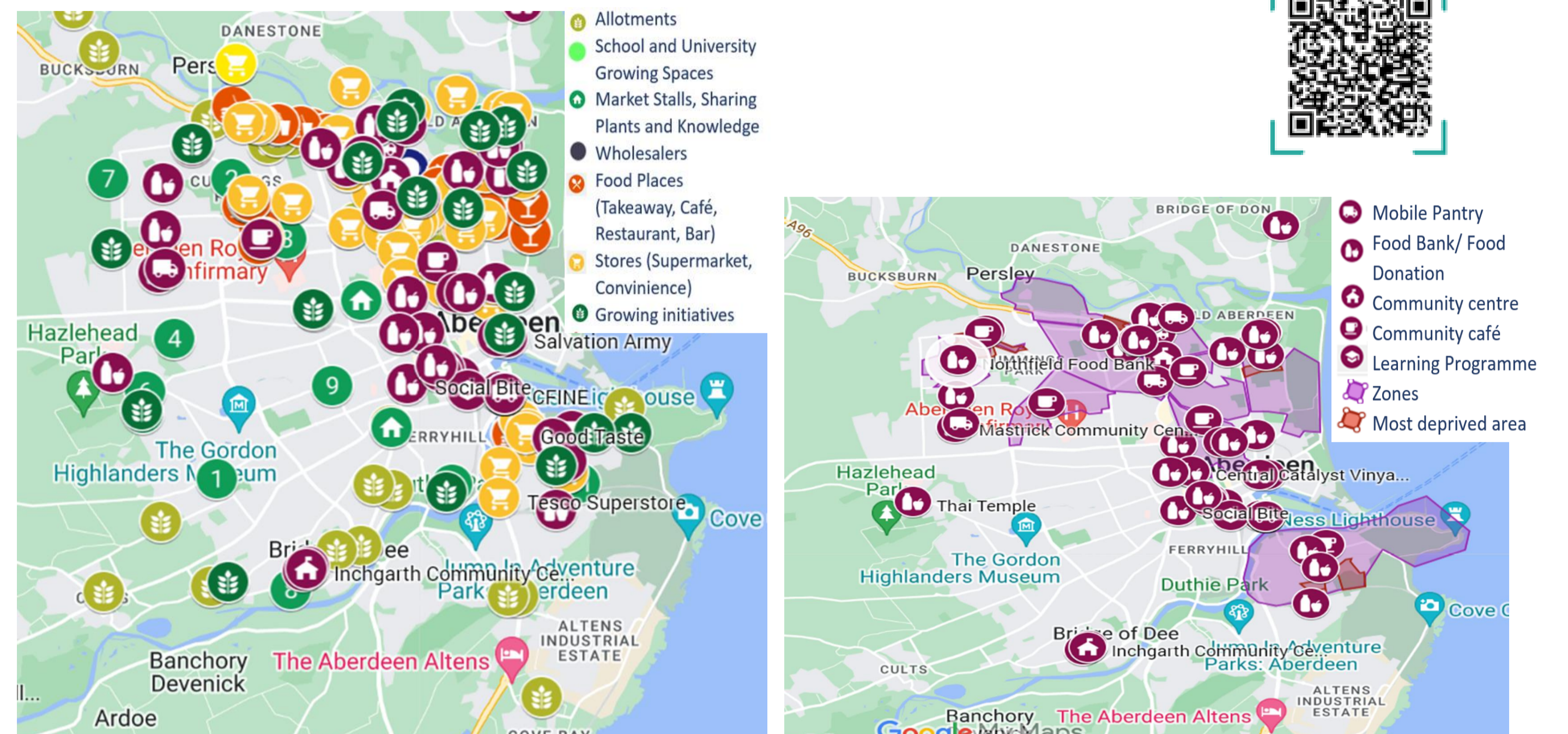
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www.abdn.ac.uk/rowett/research/spice
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Mapping of food-related community initiatives

- We mapped the full range of food access, with a particular interest in food-related community-based interventions delivered in Aberdeen.

Please scan this QR code to access our map of food-related services available in Aberdeen.



Evaluation of social prescribers' decision-making approaches

Objectives:

- To gain a better understanding of the social prescribing process, how the social prescribing scheme works in practice.
- To explore the decision-making approaches used by link practitioners, particularly those associated with food and physical activity practices and related enablers.



Methods:

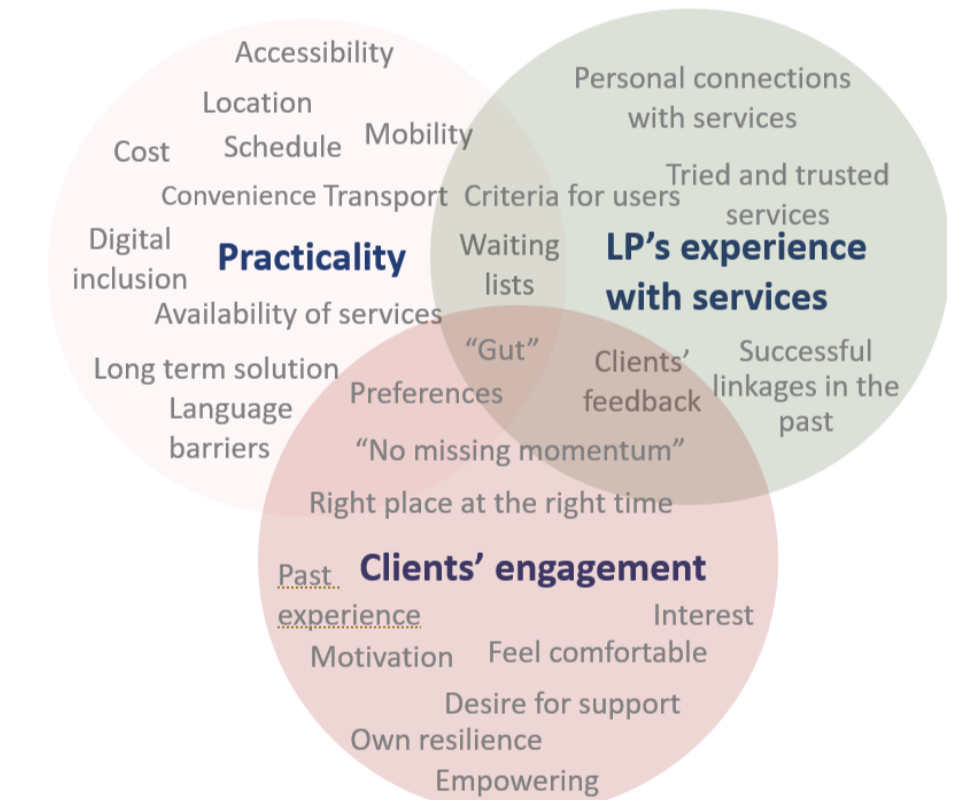
- Sixteen semi-structured interviews were conducted with link practitioners working across Aberdeen City.
- A constructivist grounded theory approach informed study design, data collection, and analysis.

Results:

Approach with clients

- Participating link practitioners described their approach with clients as **building rapport and trust while maintaining boundaries and managing expectations**, and their community role as **resource mapping and networking**.
- Main challenges:** navigating waiting lists and service limitations, low client engagement, navigating waiting lists with caseload, and sustaining support over time.

Factors considered during referral:



Dietary support via Social Prescribing

- All link practitioners considered diet and exercise to fit within the remit of social prescribing → but clients should lead this discussion.
- Dietary support via SP – typically revolved around poverty rather than health;
- Need for long-term, sustainable services to address food poverty;
- Not aware of many healthy eating services (most of these are online);
- Confident in collective knowledge about services, but some are not so confident about having the conversation and follow-up about healthy eating;
- Easy to get side-tracked by the more urgent things;

"It's relatively easy to get people access to food, it's not easy to get access to the healthier options."

"I think as much as it's a very important part of even just daily life, and social prescribing, I think it get put on the back burner quite a lot."

"It definitely fits, but only when a service user talks about that specific need. Being a person-centred service, we are not in a position where we would ask someone [...] unless they say they're struggling to access food or they are in financial difficulty, or they are interested in becoming more healthy, we would never ask because it's guided by what they need."

Discussion and Conclusions

- The qualitative study provides insight into the practical reality of making social prescription decisions and has potential to inform training and evaluation processes and support the development of SP interventions.
- Social Prescribing – a potential promising platform through which to offer healthy eating interventions, in complement of other non-clinical services based on individual needs, to encourage dietary changes in populations who do not tend to engage well with current dietary behaviour interventions.
- Need for joint action of health, social and third sectors for building and optimising healthy lifestyle community resources.

Acknowledgements

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