

## Written evidence submitted by the National Association of Link Workers (PHS0107)

### About NALW

[The National Association of Link Workers \(NALW\)](#) is the award-winning only professional body and collective voice for Social Prescribing Link Workers (SPLWs) in the UK. We are creative disruptors demedicalising social issues in healthcare and transforming healthcare for all.

*NALW submits the below evidence to help drive further engagement about the necessity of Social Prescribing link workers, who play a substantial role in preventative care, upstream interventions, reducing inequalities, and to raise awareness on complex research guidance pertaining to the inquiry.*

[Over 2,000 Social Prescribing Link Workers](#) are employed in Primary Care Networks/ GP Practices and have supported over 1.4 million patients.

The social prescribing model involves a link worker who takes a personalised and holistic approach to uncover the social determinants that matter to the person, coproduce solutions, help remove barriers and support the person embed in their community for sustainability. An asset-based approach and key bridge between healthcare and the community

[The Social Prescribing Link Worker model is underpinned by an inclusive approach that ensures equitable access to healthcare services and support for underserved groups, communities, and individuals.](#) As flexible, mobile individuals working closely with their respective communities, SPLWs empower people to tackle the social determinants of health that the NHS cannot traditionally reach.

[Link Workers do not support just one specific wellbeing or social issue](#); it can be a combination of downstream (lifestyle) and upstream (social issues)-bereavement, substance use, employment, money issues, and learning difficulties (upstream and downstream factors).

### Downstream and upstream interventions

[Obesity is recognised as a complex disease](#) and a risk factor for other non-communicable diseases, such as cancer, Type 2 Diabetes, and it decreases life expectancy. Furthermore, the evidence shows that childhood and adult obesity are linked to deprivation. However, do Obesity policies take upstream interventions into account? Our members tell us those at risk and marginalised are less likely to benefit from downstream obesity interventions unless done with upstream intervention to remove barriers.

The 'lifestyle drift' is described as a situation whereby 'governments start with a commitment to dealing with the wider inequalities but end up instigating narrow lifestyle interventions on individual behaviours, even where action at a governmental level may offer the greater chance of success' (Hunter *et al.* 2010).

Research has a role in equitable obesity policies and interventions.

### Complex interventions Research, e.g., Obesity, Mental Health

Research that examines specimens through microscopes and other technology conducts randomised trials, constructs predictive models, and runs multivariate statistical analyses, provides objective evidence to inform policy.

However, attempts to apply these methods to social research often fail. Unlike particles, people are complex and unpredictable. Moreover, they are entangled within interacting social contexts, relationships, and needs, which may need to be unravelled usefully into separate variables for analysis.

[Medical Research Council and the National Institute for Health Research 2021 new framework for developing and evaluating complex interventions](#) aimed at a broad audience, including health researchers, funders, clinicians, health professionals, policy and decision-makers, provides a helpful guide to:

- enable researchers to choose appropriate methods to improve research quality
- allow research funders to understand the constraints on evaluation design
- allow evaluation users to weigh up the available evidence in light of methodological and practical limitations.

### **Next steps**

We are urging the committee to consider the complex evaluation framework for the inquiry. In addition, the committee should enquire about the proactive engagement of social prescribing link workers to strengthen, learn and create linkages with existing opportunities.

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