

Social Prescribing and Older Adults

With at least 20% of Canada's population over 65, addressing the needs of older adults is increasingly important.¹ Social isolation and loneliness are widespread, with around 43% of Canadians aged 50 and older at risk of social isolation, up to 59% experiencing loneliness, and 41% of those aged 50 to 64 having weak social networks.²

A 2023 U.S. Surgeon General's report states: "The mortality impact of being socially disconnected is similar to that caused by smoking up to 15 cigarettes a day, and even greater than that associated with obesity and physical inactivity"³. Other social determinants of health— such as financial insecurity, lack of transportation, inadequate housing, and ageism— further exacerbate these challenges faced by many older adults.

Social isolation is linked to serious health risks, including an increased likelihood of dementia and stroke.⁴

What is Social Prescribing?

Social prescribing enables health care professionals to refer patients to non-clinical, community-based programs and services with the support of a dedicated connector/navigator. This approach improves access to local supports, strengthens social connections, promotes aging in place, and empowers individuals to take an active role in their health and well-being. By focusing on a co-creative, person-centred approach, social prescribing plays a key role in fostering healthy aging and supporting the overall well-being of older adults in Canada.



Social prescribing initiatives have shown positive impacts, including:

- 48% decrease in participants' sense of loneliness and a 12% improvement in their mental health.⁵
- Participants show improved physical activity, with one study showing 34% decrease in one or more levels of frailty.⁶
- Older adults who participate in social activities have a 47% lower risk of developing dementia.⁷
- Music therapy has been shown to reduce agitation and the need for medication in 67% of people with dementia.⁸
- Social prescribing could lead to 16,900 fewer cases of coronary heart disease, 7,600 fewer cases of dementia over 10 years, and 6,500 fewer cases of stroke over a lifetime.⁹

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How Social Prescribing Helps Older Adults

- ✓ **Enhances social connections:** By connecting individuals to tailored community activities and groups, social prescribing reduces loneliness and supports a sense of belonging and purpose for older adults.
- ✓ **Improves mental health:** Participants who attend community programs and events report an improvement in their mental health.
- ✓ **Boosts physical health:** Social prescriptions for physical activities can improve mobility and overall physical health. The co-creative and supportive nature of social prescribing ensures that the physical activities prescribed meet the needs and desires of older adults.
- ✓ **Prevents cognitive decline:** Social engagement and mental stimulation through prescribed activities that reflect the individuals interests and strengths can help maintain cognitive health.
- ✓ **Addresses social determinants of health:** By providing access to resources like financial support and housing assistance, social prescribing can promote health equity and help mitigate the broader social factors affecting health.
- ✓ **Promotes volunteerism:** Older adults who volunteer experience improved psychosocial and physical health, increased social connections, and a sense of purpose.
- ✓ **Encourages intergenerational learning:** Programs that connect older adults with younger generations improve social skills, cultural understanding, and provide emotional support for both groups.



1. Thornton JS, Morley WN, Sinha SK. Move more, age well: prescribing physical activity for older adults. CMAJ. 2025 Jan 27;197(3):E59-67.
2. Iciaszczyk N, Gallant G, Bronstein T, Brierley A, Sinha SK. Perspectives on Growing Older in Canada: The 2024 NIA Ageing in Canada Survey. Toronto, ON: National Institute on Ageing; Toronto Metropolitan University; 2024.
3. Office of the Surgeon General. Our epidemic of loneliness and isolation: The US Surgeon General's Advisory on the healing effects of social connection and community
4. Donovan NJ, Blazer D. Social isolation and loneliness in older adults: review and commentary of a national academies report. The American journal of geriatric psychiatry. 2020 Dec 1;28(12):1233-44.
5. Alliance for Healthier Communities. Social prescribing in Ontario, final report. 2020.
6. Elston J, Gradinger F, Asthana S, Lilley-Woolnough C, Wroe S, Harman H, Byng R. Does a social prescribing 'holistic' link-worker for older people with complex, multimorbidity improve well-being and frailty and reduce health and social care use and costs? A 12-month before-and-after evaluation. Primary health care research & development. 2019 Jan;20:e135.
7. Piolatto M, Bianchi F, Rota M, Marengoni A, Akbaritabar A, Squazzoni F. The effect of social relationships on cognitive decline in older adults: an updated systematic review and meta-analysis of longitudinal cohort studies. BMC Public Health. 2022 Feb 11;22(1):278.
8. Gordon-Nesbitt R. Creative health: The arts for health and wellbeing.
9. Canadian Institute for Social Prescribing. A Healthier Canada An Analysis of the Potential Economic and Social Impacts of Social Prescribing. 2024.