



SF Social Prescribing Vibrant Communities Workshop Impact Report

Hosted by



Foundation for
Social Connection



social prescribing usa

Coalition for
Social Connection

UCSF

University of California
San Francisco



front porch



By the Numbers

55

attendees
representing

Attendees spanned the full
social prescribing ecosystem:

30

design/fund programs

20

connect people to services

44

organizations

15

influence policy

11

conduct research

11

refer patients

Note: Attendees self-reported multiple roles

9 Sectors Represented:

36 Non-profit

10 Healthcare

5 Academic/Research

5 Business/Private Sector

3 Government

1 Philanthropy

1 Policy

1 Technology

1 Media

Note: Attendees self-reported multiple affiliations

From Attendees

"I look forward to **working collaboratively** with others to **develop a plan of action** moving forward. It gave me the **opportunity to connect** with folks I have already worked with and meet some new advocates in the Bay Area."

"I had a really wonderful time and especially appreciated the opportunity to connect with the other participants. The yearbook and gallery walk led to some wonderful **new connections and relationships.**"

"Convenings like this definitely inspire me to **start doing more** in the areas I have control and influence over."

Summary

The Foundation for Social Connection, in partnership with the UCSF Northern California Coalition for Social Connection, Social Prescribing USA, and Front Porch, hosted the first-ever SF Social Prescribing Vibrant Communities Workshop. With support from MetLife, the event brought together physicians, researchers, funders, community-based and arts organizations, and community members to explore the future of social prescribing in the region. The convening was designed to foster connection, shared learning, and collaboration while identifying existing strengths and opportunities for growth. Throughout the day, participants worked toward a common goal: developing a collective vision and action plan to advance social prescribing across the Bay Area.

A highlight of the convening was the Lived Experience Panel, where community members shared powerful firsthand stories about the impact of social prescribing from both patient and caregiver perspectives. Participants also heard from physicians who have long championed whole-person care and integrated social prescribing into their practices. These presentations helped establish a shared understanding of social prescribing and reinforced its potential to improve health outcomes by addressing social connection, purpose, and community engagement alongside traditional healthcare.



Lived Experience panelists share their stories

Through collaborative discussions, attendees identified a remarkable network of existing assets, including community-based organizations that provide opportunities for participation and volunteerism with the arts, nature, and meaningful social connection — all of which are linked to improved health and

well-being. Participants emphasized that the Bay Area is uniquely positioned to advance social prescribing, with a strong foundation of libraries, neighborhood centers, cultural institutions, social service organizations, faith communities, and other community resources already working to foster connection and belonging.



Attendees map Bay Area assets

A key theme of the convening was the need to better connect these existing assets with healthcare systems, making it easier for providers to refer individuals to community-based supports that can complement traditional medical care. At the same time, participants acknowledged significant barriers to broader implementation,

particularly within the current U.S. healthcare system. Challenges related to funding, infrastructure, evaluation, and support for community organizations emerged as key obstacles.

Participants left with a shared recognition that the Bay Area has many of the essential ingredients for a thriving social prescribing ecosystem and that the next phase of this work will focus on building the infrastructure, partnerships, and referral pathways needed to connect people to the community resources that support health, well-being, and belonging. The



Attendees discuss assets and commitments to further this work

UCSF Northern California Coalition for Social Connection will be continuing to lead this effort by convening a working group of Bay Area partners who will strategize key priorities and next steps for advancing social prescribing throughout the region.

Resources to Explore

The Big Picture for Social Prescribing in the U.S.

- [The Future of U.S. Social Prescribing: Foundations, Implementation, and Leadership Summit Insights](#)
- [Building the Future of Social Prescribing in the United States](#)
- [Social Prescribing USA Program Map](#)

Key Tools to Help Plan Social Prescribing Programs

- [Arts on Prescription: A Field Guide for US Communities](#)
- [Social Prescribing Roundtable Convening: A National Toolkit](#)
- [Rx for Community Wellness: How Social Prescribing Can Empower Libraries to Boost Public Health](#)
- [The Action Guide for Building Socially Connected Communities](#)

Research from Abroad

- [Social Prescribing USA Evidence Library](#)
- [Webinar | Arts on Prescription: A Field Guide for US Communities | UF Center for Arts in Medicine](#)
- [Social Prescribing Academy](#)

Stay Connected with Us

- [The Foundation for Social Connection](#)
- [Social Prescribing USA](#)
- [UCSF Northern California Coalition for Social Connection](#)
- [Front Porch](#)

A Call to Action

We know that social prescribing represents a low-risk, high-value strategy to improve wellbeing and reduce the overall healthcare burden to The City. We also know the values of social prescribing — connection, community, care — are the values that power the city of San Francisco. The community assets are here. The science is clear. The moment is now for all of us.

All Organizations and Individuals

Map community-based assets by neighborhood where individuals can be referred and prioritize the capacity of organizations to handle referrals. Consider how these efforts can be centralized. The [Partnership Mapping and Community Conditions of Social Connection Exercises](#) in Step 3 of the Action Guide for Building Socially Connected Communities are great tools to lay out important relationships and key assets/barriers to advancing social connection.



Attendees map Bay Area assets

Funders

Support efforts that connect health care providers and social service organizations, cultural institutions, and outdoor/nature-based activities, with a particular focus on investing in “link workers” or “link services” or “linkage training” so that referrals from health providers to organizations can be done as seamlessly as possible, and to enable tracking and follow up to reduce referral dropoffs and drop outs.

Health Care Providers

Review the research on social prescriptions, and determine where and how these referrals could be integrated into existing patient care. Implement

routine screening for loneliness using the UCLA Loneliness Scale or other validated assessment tools, and support the development of a referral process for patients who may benefit from social, arts-based, or nature-based interventions.

Health Insurers

Explore how to start investing in social prescribing to address systemic issues for patients and save money in both the short and long term, and explore reimbursements for community referrals that come with fees/costs.



Drs. Perissinotto, Kotwal, and Siegel (left to right) share insights with workshop attendees

Community-based Organizations

Engage with health practitioners to start small trials of social prescribing. Coordinate with other community-based organizations (CBOs) to work together to more fully support patient health and well-being. Explore potential funding models to support your role in social prescribing from insurers, government-supported funding, and philanthropy.

Individuals

Talk with your health care providers about social prescribing, learn what they know about the practice, and inquire whether they would be willing to refer appropriate patients to community organizations.

A special thanks to MetLife Foundation
for supporting this workshop

