

RESEARCH PROPOSAL

Evaluating the Impact of Sauna Social Prescriptions









Prepared For Community Sauna Baths CIC

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RESEARCH TOPIC

The Impact of Sauna Social Prescriptions. A Longitudinal Study of Sauna Bathers Referred to Community Sauna Baths to Investigate the Impact of the Sauna Bathing Social Prescription.

BACKGROUND

Alongside a growing focus on social prescribing and calls for community-led approaches to improve neighbourhood health, community saunas in the UK are experiencing a surge in popularity. The rise of sauna health programmes and the concept of the sauna as a social prescription necessitates research to validate its efficacy as a health intervention. Research conducted this year provided a foundational understanding of the relationship between sauna bathing and health and well-being outcomes for sauna users in London (McGrath, 2025). This research generated previously unseen data on the impact of community saunas, revealing, amongst other conclusions available on Pages 8-10, a significant association between sauna frequency and physical and mental well-being. Evaluating the efficacy of sauna social prescriptions remains a considerable challenge due to the novel nature of the prescription and a gap in academic research. Having laid the groundwork in the aforementioned research, this document presents a research proposal for a targeted study assessing the impact of sauna social prescriptions.

LITERATURE REVIEW

Below are the core conclusions (relevant to this proposal) from the literature review conducted for the Academic Study, 'Should Doctors be Prescribing Saunas?'.

- Regular sauna use has been shown to provide well-documented physical and psychological benefits (Kunutsor & Laukkanen, 2023, Dudzik et al., 2024), but these results may not extend to the UK population of sauna bathers who use the sauna less frequently than nordic nations.
- Sauna-based social prescriptions are a multifaceted and underdeveloped area of inquiry: empirically they offer tangible benefits, yet our understanding of how and why they work and how best to evaluate them—remains limited (Vidovic et al., 2021).
- The Measure Yourself Concerns and Wellbeing (MYCaW ®) tool, developed specifically for evaluating social prescription interventions, is an appropriate instrument for future research.

A clear research direction is to assess the role of sauna social prescriptions in enhancing well-being, as evaluated through a case study of a UK sauna. This assessment will utilise an appropriate framework (The Social Cure) and evaluation instrument (MYCaW ®) to establish an evidence base of the impact of saunas as a wellness intervention.

METHODOLOGY

This research will employ a mixed-methods design and case study approach, following a cohort of bathers referred to Community Sauna Baths (CSB) for the social prescription programme. The instrument of measurement will be the MYCaW ® Tool, which is designed to collect both qualitative (concerns and worries) and quantitative (rating of concerns and worries) data. The MYCaW ® will be employed in a consultative fashion with each participant before the social prescription begins and after it concludes.

RESEARCH GOALS

The primary objective of this research is to carry out the first study in the UK examining the effects of a sauna social prescription. The research will explore the concerns and worries that sauna bathers bring to their sessions, as well as the extent to which the prescription addresses these matters. This will create a novel evidence base for the efficacy of sauna as a well-being intervention.

RESEARCH IMPORTANCE

With the NHS 10-Year Plan emphasising the third sector as key to boosting neighbourhood health, interest is increasing in community-led social prescribing schemes (NHS England, 2025). Meanwhile, sauna culture in the UK is evolving, and health programmes are becoming central. The British Sauna Society (BSS) awarded Sawna Bachs 'Best Health Programme' at this year's Sauna Summit, recognising their commitment to "bring the physical, mental and social health benefits of authentic sauna to a wider group of people." This was partly driven by Sawna Bach's research collaboration with Bangor University, which is exploring the benefits of sauna bathing in the UK (Bangor University, 2025). Additionally, now included in the BSS Health Stream, I am aware that the health strategy will play a key role in their 2026 growth plans.

Now is the ideal time to generate evidence and lead on sauna health interventions.

Community Sauna Baths is attracting both local and international attention for its prescribing programme, with European partners interested in its outcomes and keen to replicate its approach. As CSB aims to expand to more sites across London and establish itself as a UK leader and exemplar in the sauna scene through the Community Sauna Network, documenting the impact of the social prescribing programme is increasingly important. Without data-supported evidence of the programme's benefits, it will be harder to persuade partners at local (NHS Trust, Planners), national (Community Sauna Network), and international (Norges Badstulaug) levels of its effectiveness. This research seeks to clarify how sauna prescriptions work, for whom, and under what conditions. It also provides CSB with the chance to customise prescriptions for specific issues while considering a scalable, commercially viable programme for the five other sauna locations.

EXPECTED OUTCOMES

- Academic: Exploratory findings that identify the specific psycho-emotional concerns and worries addressed by sauna usage, and the extent to which sauna is effective for addressing specific concerns.
- Policy: Evidence for or against the inclusion of saunas in social prescribing schemes.

 The resulting report will be submitted to the Social Prescribing Network for consideration.
- Business: An opportunity to demonstrate CSB's community impact during negotiations with the NHS Trusts and local planning stakeholders when bidding for new sauna sites. Simultaneously, there is an opportunity to validate or challenge the commercial viability of the existing 10-session programme, which is offered free of charge.

PROJECT ROADMAP



PROPOSED TIMELINE

This timeline is based on the existing prescription model of 10 free sessions, assuming participants sauna once a week for 10 weeks. Dates are subject to researcher availability and CSB commitments; all dates refer to 2025.

	July	August	September	October
PHASE 1	w/c 7th for 2 weeks			
PHASE 2	w/c 14th for 1 week	k		
PHASE 3		w/c 28th for 4-10 weeks		→
PHASE 4			w/c 15th for 4 weeks	
PHASE 5				w/c 6th for 4 weeks

CHALLENGES AND MITIGATIONS

Challenges Description Mitigation strategy It is unknown how many sauna Recruitment of CSB Social Prescribing Team to 01 prescription referrals the team share pipeline during project participants receives and how frequently. scoping and design. This study requires a sample of newly prescribed sauna users. Researcher to determine Study attrition reduces sample study power size in Phase 1 size and undermines the Study attrition - over-recruit by 10% credibility & reliability of results. 02 (loss of Consider incentives This methodological design Reduce participation burden depends on participants participants) e.g. by offering MYCaW completing the follow-up consultations online. MYCaW consultation. Participants referred for the Consider inclusion and prescription may be exclusion criteria during considered vulnerable by an Phase 1. **Ethical oversight** Ethics Committee, requiring · Identify and engage a advanced ethical clearance. research ethics board for oversight.

COST

The investment for this project would be £2,870.00, inclusive of the researcher's fee, MYCaW license, and existing costs associated with providing the social prescribing programme. Refer to **Table 2** on page 7 for a detailed breakdown of costs.

Table 1: High-level Project costs

Category	Details	Cost
Researcher Lead Fee	approx 82 hrs @ £35/hr	£2,870
Social Prescribing Team Resource	Coordination, referrals	Absorbed
Community Sauna Access	10 free sessions per participant	Absorbed
Facilities & Admin Support	Already costed as part of existing community prescription programme	Absorbed
MYCaW Instrument License	£199.00 + VAT	Purchased in May 2025
Total Project Costs		£2,870.00

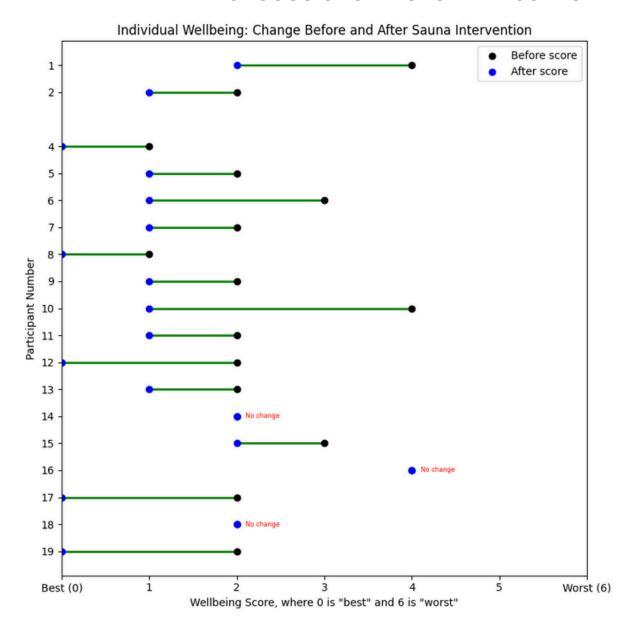
COST BREAKDOWN

Table 2 provides a breakdown of project activities by phase, including estimated researcher hours to ensure transparency in costing. The researcher's rate aligns with Imperial College's London Research Payscales for 2024.

Table 2: Breakdown of project activities with associated costs

Project Phase	Activity	Estimated Researcher Hours	Subtotal (£)	Notes
	Project scoping & design	10	£350	
Phase 1	Ethics application & prep	12	£420	
Phase 2	Participant recruitment and coordination	8	£280	
Phase 3	Data collection (20 consultations)	20	£700	Based on a 30 minute MYCaW consultation pre and post the sauna prescription, per participant, on a sample of 20 participants.
Phase 4	Analysis	15	£525	
Phase 5	Report writing & dissemination	10	£350	
	Contingency/ad min (10%)	7	£245	
	Total (approx. 82 hrs)	_	£2,870	

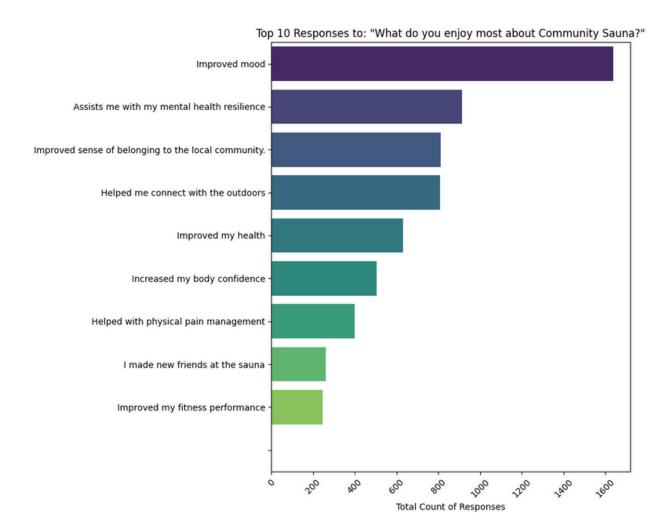
APPENDIX ITEM 1: AUFGUSS SAUNA STUDY RESULTS



The above graph presents the pre-sauna and post-sauna well-being scores for each participant, with green lines indicating an increase in well-being scores. Of the 18 participants, 16 reported an increase in well-being after the sauna, while two remained unchanged, as indicated by the annotation "no change." Evidence that almost all participants experienced a shift towards increased well-being suggests that there is an effect here. A paired samples t-test on the pre-sauna and post-sauna well-being scores yielded a p-value of <0.01, and a t-statistic of 6.75. This indicates a statistically significant improvement in well-being scores after the sauna aufguss, which we can confidently conclude was not due to random chance.

This finding alone provides a strong rationale for considering the inclusion of communal aufguss rituals in the sauna social prescribing programme.

APPENDIX ITEM 2: ENJOYMENT REASONS



The analysis of CSB's annual survey indicates that most bathers are aged between 25 and 34, with visits to the sauna occurring at least once a month. This is important for contextualising the primary reasons sauna bathers enjoy the community sauna: an improved mood, closely followed by assisting with mental resilience and a stronger sense of belonging to the community. Additionally, a **significant association** was found between the frequency of sauna use and self-reported improvements in both physical and mental health outcomes (p < 0.01).

The findings strongly suggest that, at present, UK sauna bathers associate the sauna with a method to manage and enhance their mental health. This proposal provides an opportunity to generate further evidence that either supports or refutes this claim.

APPENDIX ITEM 3: TOPIC MODELLING ANALYSIS

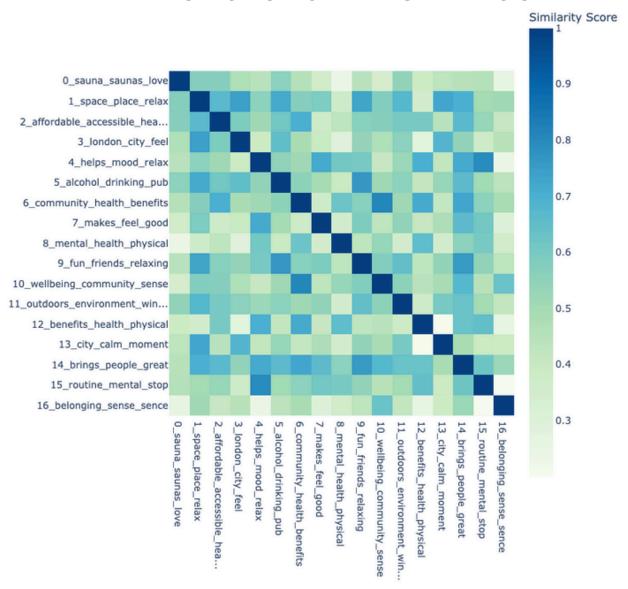


Figure 3: Heatmap similarity matrix of BERT Topics.

The researcher conducted Natural Language Processing (Topic Modelling) analysis of 1,795 responses to the question: "Why is Community Sauna Important to You?". Analysis identified 16 distinct topics in the responses. In this Figure, darker squares indicate a higher semantic similarity between topics; for example, **Topic 15 (routine_mental_stop)** is highly similar to **Topic 4 (helps_mood_relax)**.

These insights already provide actionable ways to tailor sauna services and programming, but CSB could consider extending this research to identify what is important to bathers on prescription.

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WORD COUNT

This work contains 1734 words, including Tables and Figures.

AND AI STATEMENT

I have utilised Grammarly AI to verify spelling and grammar, as well as to offer suggestions for improving clarity and coherence. I declare that this submission is my original work and that any AI-generated text or images have been fully cited as such