SOCIAL DETERMINANTS OF HEALTH
Good health begins in the places where we live, learn, work and play

Neighborhood & Built Environment

Health & Health Care

Economic Stability

SDOH

Education

Social & Community Context
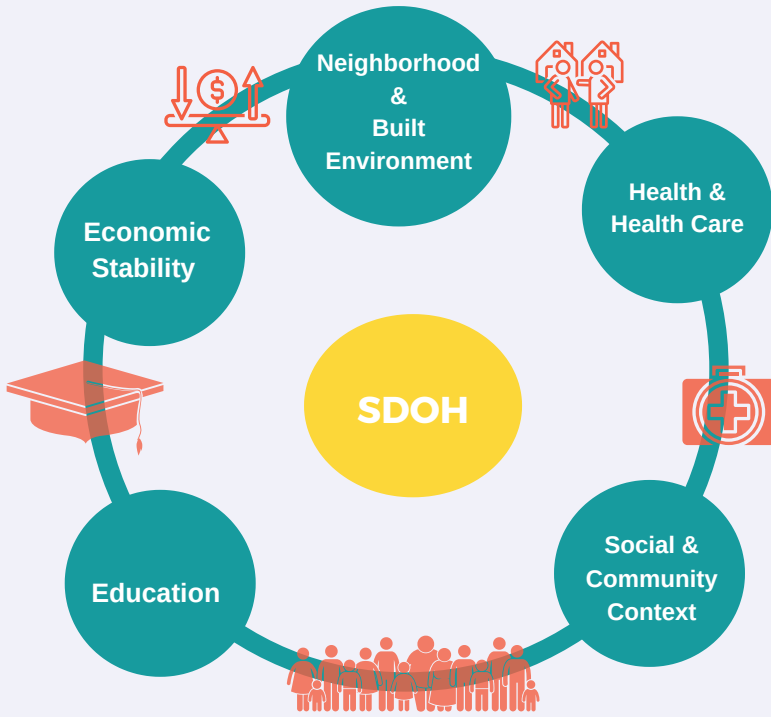
STUDIES SUGGEST THAT 80-90% OF HEALTH IS DETERMINED BY A PERSON'S SOCIAL DETERMINANTS OF HEALTH, ONLY 10-20% IS ACCOUNTED FOR BY MEDICAL CARE.

Social Determinants of Health (SDOH) have the biggest impact on health outcomes, more than health care access and delivery
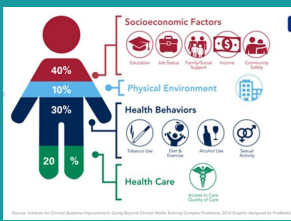
Clinical providers should reflect on our power and privilege, as a part of the large scheme of inequities and within our patient relationships we can show our commitment to social justice

Education is vital and should include not just what SDOH are, but also how they came to be; who benefits and who suffers; and what can be done about them, how, and by whom

SDOH can be addressed at the clinical encounter, as well as from a policy and societal level

APPLYING THE 5 MICROSKILLS TO PRECEPTING THE SOCIAL DETERMINANTS OF HEALTH

#1 TELL & COMMIT
- TELL ME ABOUT THE PATIENT YOU JUST SAW
- WHAT SPECIFICALLY ABOUT THE PATIENT'S SOCIAL CIRCUMSTANCE HAS AFFECTED THEIR HEALTH?

#2 PROBE & PROVIDE
- WHAT QUESTIONS DID YOU ASK AS PART OF YOUR SOCIAL HISTORY THAT SUPPORTS YOUR DIAGNOSIS?
- WHAT CAN WE DO TO HELP?

#3 TEACH
- FIND A TEACHING POINT USING SDOH AND THE PATIENTS' PRESENTING ILLNESS
  - **ACKNOWLEDGE:**"HAVE WE CONSIDERED THE PATIENT'S UNINSURED STATUS?"
  - **EMPATHIZE:** "DO YOU THINK THE PATIENT MAY BE FRUSTRATED ABOUT UNSAFE CONDITIONS TO EXERCISE IN THEIR NEIGHBORHOOD?"
  - **ACTIVATION:** FIND SDOH SERVICES SPECIFIC TO PATIENT'S NEEDS
  - **ENGAGEMENT**: HAVE A SOCIAL WORKER COME IN TO DISCUSS ELIGIBILITY OF MEDICAID/PLANS

#4 REINFORCE
- START WITH THE SOCIAL QUESTIONS TO CREATE A TREATMENT PLAN, GIVEN WHAT WE KNOW ABOUT THE SDOH AND HEALTH OF THE PATIENT

#5 FILL IN THE GAPS
- USING THE SDOH CONSIDER HOUSING AND FOOD INSECURITIES AND ASK WHAT MORE WE CAN DO TO HELP THE PATIENT

LANES
GUIDING THE SDOH CONVERSATION WITH LEARNERS

(L) LINK THE PATIENT'S SOCIAL NEEDS TO THE VISIT OR HEALTH ISSUE

(A) ASSESS THE PATIENT'S KNOWLEDGE OF SOCIAL NEED AND IMPACT ON HEALTH

(N) NORMALIZE THE SOCIAL NEED BY PROVIDING COMMUNITY CONTEXT AND RELATED STATS

(E) EDUCATE THE PATIENT ON THE CONNECTION TO HEALTH

(S) SHARE INFORMATION ON RESOURCES

HOW INSTITUTIONS ACROSS THE COUNTRY ARE ADDRESSING THE SOCIAL DETERMINANTS OF HEALTH

University Hospitals launched The UH Difference:Vision 2010, which aimed to direct as much spending as possible toward local minority- and female-owned businesses to produce lasting change in northeast Ohio.

Gundersen Lutheran Health System has been committed to the health of its communities by working with local restaurants, convenience stores, and other retailers to offer healthy food choices to its community

Johns Hopkins University, in collaboration with Morgan State University, has developed a new public school in one of the poorest neighborhoods in east Baltimore. The school, named Henderson-Hopkins, is part of a major redevelopment project that includes new science and technology buildings, a park,retail development, and mixed-income housing.

As a prominent institution within a city challenged with crime, extreme poverty, and poor living conditions, **Henry Ford Health System** has partnered with several institutions to improve local neighborhoods and develop safe and affordable housing for the residents of Detroit.

Florida International University has developed the Green Family Foundation Neighborhood HELP (Health Education Learning Program), which exposes students to the delivery of health care from a family and community perspective that will shape the way they interact with patients for the rest of their careers.

REFERENCES

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